

Butacare Limited

Victoria Cottage

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service:

Victoria Cottage is a care home which provides care and support for people with physical disabilities, learning disabilities or autistic spectrum conditions.

The service was a large home, bigger than most domestic style properties. It was registered for the support of up to 12 people. 10 people were using the service at the time of the inspection. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area and the other large domestic homes of a similar size. There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home.

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

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

We received extremely positive feedback about the service and the care people received. People, relatives and professionals commented positively about the caring and responsive approach of the staff. Everyone said the service was excellent because of how well it was managed. There was evidence that people achieved good care outcomes, and everyone's comments about the service supported this. This was reflected in a professional's feedback which said, "I'm very impressed with the care home setting. The management and the staff are very good, caring, and respond to the residents' needs. High class service!"

People were protected from harm by staff who were trained to identify and report concerns. People were safe because risks had been managed well. There were enough staff to support people safely. People were supported to take their medicines safely. Efforts had been made to reduce the amount of medicines people took to promote their wellbeing. Lessons were learnt from incidents to prevent recurrence. Staff followed effective processes to prevent the spread of infections.

People received effective care to meet their needs. People were supported by very skilled and knowledgeable staff. People were supported to eat well to maintain their health and wellbeing. Working closely with other professionals was central to the good care provided to people.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Everyone said staff were exceptional at promoting a caring environment for people. Staff had respectful, caring and friendly relationships with people. Staff upheld people's dignity and privacy, and they promoted

their independence.

People received exceptionally personalised care and support which met their needs, reflected their preferences and promoted their wellbeing. People's views mattered and the service valued relatives' contributions to discussions about people's care. The registered manager listened to suggestions, concerns and complaints. They used this information to continually improve the service.

There was a positive, open and empowering culture. Staff roles and responsibilities were clear, and staff were supported and encouraged to use creative and individualised methods to support people to achieve their personal goals. The provider's values were reflected in the way staff supported people. The provider's quality monitoring processes were robust, and they evidenced what they did to continually improve the service.

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

Rating at last inspection:

The last rating for this service was good (published 31 May 2017).

Why we inspected:

This was a planned inspection based on the previous rating.

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?

Outstanding ☆

The service was exceptionally caring.

Details are in our caring findings below.

Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-led findings below.

Victoria Cottage

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.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Victoria Cottage 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 the inspection

We reviewed information we had received about the service since the last inspection. This included information sent to us by the registered manager or shared with us by the local authority. We used all of this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

Some people had complex needs which meant they were not able to tell us about their experience of the service. We observed how staff interacted with and supported people in communal areas of the service. This helped us understand the experience of people who could not talk with us.

We spoke with two people, two care staff, the registered manager, and a visiting health professional. We also spoke by telephone with two relatives and an advocate or befriender for three people.

We reviewed a range of records. This included two people's care records and multiple medicine records. We looked at two staff files to review the provider's recruitment, training and staff supervision processes. We also looked at a variety of records relating to the management of the service, including policies and procedures, audits and surveys.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. The registered manager sent us written feedback from three professionals who worked closely with the service. We also received written feedback from two relatives.

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 the 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 told us they were safe. One person told us, "I feel safe, I'm happy here." Another person smiled, and they said they were happy living at Victoria Cottage.
- Relatives had no concerns about people's safety. One relative said, "I have no worries at all about [person] being there. [Person] fitted in from day one and staff have given [person] a lot of support." Another relative told us, "[Person] has been there for [number of years]. I know [person] is safe because [person] is always happy to go back after visiting home."
- Staff had guidance on how to report concerns. Concerns had been dealt with quickly because the registered manager reported these to the local authority and the Care Quality Commission in a timely way.

Assessing risk, safety monitoring and management

- People's risk assessments helped staff to minimise risks in areas such as medical conditions, mobility, medicines, and safety when people were away from the home.
- Relatives told us staff managed risks well and people had appropriate equipment when needed.
- Staff carried out health and safety checks to ensure the premises were always safe, and there were no hazards that could put people at risk of harm. People had individual assessments that guided staff on how to support them safely in case of emergencies, such as a fire.

Staffing and recruitment

- People, relatives and staff told us there were enough staff to support people safely, and to help them take part in a variety of activities in and outside of the home. One relative said, "There are enough staff, and [registered manager] doesn't use agency or anything like that much."
- Most staff had worked at the service for many years and they knew people very well. This meant that people received consistent care. One relative told us, "There has been very little staff turnover since the new management came into post, with staff appearing satisfied in their roles."
- The registered manager carried out robust recruitment checks to ensure all new staff were suitable to work at the service.

Using medicines safely

- People were supported safely with their medicines. Records showed that staff gave people their medicines as prescribed by their doctors.
- One professional told us medicines were managed well, and they were impressed with the quality and clarity of medicines records.

Preventing and controlling infection

- The service was clean, pleasant and comfortable for people to live in.
- Staff had been trained in infection control and prevention. They applied this knowledge in the way they cleaned the service, handled food, and when supporting people with personal care.
- Where required, staff used personal protective equipment such as disposable aprons and gloves to reduce the spread of infection.

Learning lessons when things go wrong

- Incidents and accidents were recorded, and the registered manager reviewed these to reduce the risk of recurrence.
- Learning from incidents was shared with staff through team meetings and during individual staff supervision so that they could improve their practice.

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 individual needs were met by the service. One person told us staff provided good care and support. They said, "I'm happy with everything, I get good support."
- Relatives were happy with the quality of care provided to their family members. One relative said, "I always see a consistent level of care whenever I go there." Another relative told us, "Without a doubt, [Person] gets the care and support they need. The staff are very good with [person] and have taken the time to get to know [person]."
- Without exception, all the professionals commented positively about the quality of people's care. One professional said, "The all-round package is the best I have seen in any learning disability service I have been to. [Staff] have been able to settle someone who was going through a difficult time, and they made it look easy." Comments from another professional said a person's care plan about a specific health condition was, "Amazing and covered everything."

Staff support: induction, training, skills and experience

- Staff had the right skills, experience and knowledge to meet people's needs. They received an induction into the service and effective ongoing training. One staff member told us, "The training is absolutely fantastic. It is because of this that we do a great job."
- Staff gained additional skills and knowledge to support people with their individual needs or health conditions. For example, some staff were doing positive behaviour support training offered by a specialist NHS learning disabilities service. This helped them to support people better when they were upset or distressed.
- Staff said they were well supported by the registered manager. They had regular supervision meetings. They also said they learned from the registered manager, who regularly worked alongside them.

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

- People told us they were supported well to eat and drink enough, and they enjoyed the food.
- People were involved in planning meals as their food preferences had been considered when planning menus. One person helped staff regularly to prepare meals and they said they enjoyed this.
- Relatives told us people had enough and a variety of food to eat. One relative said, "Meals are freshly cooked and with the residents' preferences catered for." Another relative said, "I have been there when the food is served and I am very impressed. It smells good too."
- There was additional support for people with specific nutritional needs. For example, there was detailed guidance to support one person to increase the calories they consumed. They were encouraged to eat all their meals, and they were also given regular fortified drinks. Records showed they were steadily putting on

weight.

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

- Staff worked closely with health and social care professionals to ensure people's health needs were met to maintain their well-being. People were supported to access a variety of services when needed and their health was closely monitored.
- Relatives were complimentary about how the service met people's health needs. One relative sent a compliment to the service which said, "Thank you again for the exceptional care shown to [person] during their illness."
- Written feedback from a health professional said, "The level of care and attention to detail has been exemplary and this is reflected in the improvement of health status in all patients."
- Staff helped people to look after their teeth. Staff were aware that poor oral health had a negative impact on people's overall health and wellbeing.

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

- Everyone told us the premises had been greatly improved in since our last inspection to provide a more homely and pleasant place for people. One relative said, "The home has a friendly, homely and welcoming atmosphere." One professional said, "Environmental improvements have made it a much nicer place to live in."
- All areas of the home were well maintained. Equipment and appliances were in good working order, and any required repairs were carried out quickly.

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 we found these were met.

- Assessments showed that most people had variable mental capacity. This meant they were not always able to make decisions about some aspects of their care and support. Where this was the case, people's relatives or professionals had been consulted to decide how to best support the person. This ensured the care and support provided by staff was in people's best interest.
- Staff told us they always supported people to make decisions about their care. They said they had got to know what the sounds made by people who could not speak meant, and they acted on these to uphold people's rights.
- Where required, people had valid authorisations that supported staff to provide care safely, but in the least restrictive way.

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 outstanding. At this inspection this key question has remained the same. This meant 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

- People and relatives told us staff were exceptionally caring and kind. One person said, "I'm happy here, everyone is nice." One relative told us there was a 'family' feel and lots of laughter at the service. They also said, "The residents are respected and valued, and their family members regularly consulted." While another relative said, "I find everyone kind, happy and [staff] 'care' for [person] on more than one level."
- Professionals were equally complimentary about the caring and compassionate nature of the staff. One professional's feedback to the service said, "I have always found Victoria Cottage excellent in their dealings with all service users. It seems like they are a happy family, and carers show dignity and respect, at all times. This to me reflects the excellent management of the home." Another professional told us staff were very caring and kind to everyone, including visitors.
- We observed pleasant chats between people and staff. One person was talking to a staff member about their DVD collection which they enjoyed watching. While another person happily spoke with us and a staff member about television programmes they had watched the previous night. One staff member said, "We get worried when it's quiet here, we don't like it that way."
- Relatives told us they always felt welcomed when they visited, and they had developed good relationships with staff. They said they found the registered manager really approachable and willing to do anything to make people's lives better. One relative said, "There is always someone happy to chat to me about [person], make me a coffee and tell me about [person]'s week." Another relative said, "[Staff] are always happy to see me when I visit, and they are always kind."
- One relative was particularly pleased with the level of support they received recently when their family member was in hospital. They said, "The exceptional level of care and compassion that [person] has received has been even more apparent when [registered manager] stayed all night with me at the hospital and we got home the next day at 4.00pm. He was able to calm and reassure [person], this was invaluable support to me. I feel that [person] could not be happier anywhere, but Victoria Cottage. I wish them all (very much deserved) best wishes."
- Staff were highly passionate about their work. They spoke fondly about people, and they had supported some of them for many years. One staff member said, "We are a homely home because this is [people]'s home." They went on to tell us about how well they supported a person to cope with the death of a family member. They also sent a plant to another person's relative and provided emotional support to them when they lost a close family member. The relative sent a message to them saying they were very grateful for the care showed by the staff.
- Staff said their proudest achievement was that after many attempts, they had recently re-established contact with a person's relatives who had not visited for many years. A few of them visited the week before

our inspection and a staff member described that moment as being, "Quite emotional". This person was extremely happy to see their family members and it was nice to see that they still remembered them. About this achievement, one professional said, "[Registered manager] is a man of detail and he will not let off until he has achieved good outcomes."

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

- Most people could not speak, and they used other methods to communicate their needs and choices. Staff understood how people communicated, and they worked with people to ensure their views and choices were always considered.
- Throughout the inspection, we observed how staff ensured people had a say in how they were supported or what they wanted to do. For example, even when people had planned external activities to go to, staff did not assume that people would always want to go. Instead, they reminded them what was planned and asked if they wanted to go. This was an exceptional way of helping people to express their wishes.
- Staff also worked closely with people's relatives who advocated for people's needs and choices. Relatives told us they were involved in making decisions about their family members' care. One relative said, "[Registered manager] keeps me fully involved with any decisions for [person] and I am very happy about that." Staff told us they always valued relatives' involvement in people's care.
- Some people also had social workers who helped them to make decisions about their care. There was information about an independent advocacy service that could also help people to make decisions. Three people were being supported by an independent advocate. This was important because most people did not always have the mental capacity to understand what support they needed.
- One person said they could tell staff how they wanted to be supported. The person's relative said, "It's really good that [person] has a voice. They are very good that they include [person]."

Respecting and promoting people's privacy, dignity and independence

- People and relatives told us staff were always respectful in the way they supported people because they promoted their privacy and dignity, particularly when providing personal care. Staff told us it was always important that they supported people discreetly in communal areas and they provided personal care in private. We observed this during the inspection.
- Staff helped people to remain as independent as possible. They told us they assessed what people could do for themselves and they ensured they continued to do this where they could. Relatives confirmed this. One relative said, "[Person] does not need too much equipment and is greatly encouraged to be as independent as [person] can be." Another relative said, "Residents are encouraged to be as independent as possible and their personal interests catered for."
- One person told us they liked helping around the service as much as they could. They really valued the opportunities to take part in meaningful activities like preparing food, helping other people, and tidying up.

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 good. At this inspection this key question has now improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- People and relatives were extremely complimentary about how the service provided exceptionally individualised and responsive care. One relative said, "The standard of care is totally customer focused and tailored to the individual." Another relative told us, "It was the best thing I could have done to move [person] there."
- Everyone told us staff went above expectations to respond to people's changing needs. A relative of a deceased person was very happy with how their family member had been supported by the service. In a letter to the registered manager they said, "Thank you again for the exceptional care that you have shown to [person] over the years and during [person]'s illness. We will always remember your dedication, professionalism, care that went above and beyond the job description, and zillion hours you clocked up with the countless trips back and forth to [hospital]." The relative was also extremely appreciative of the adaptations the service had made in preparation for the person returning from hospital. This included the fitting of a stair lift. The relative said, "Hopefully, the stair chair will earn it's stripes by assisting others in the future."
- Professionals also highly commended the registered manager for the work they did to lead a staff team that provided excellent care to people. They said the registered manager worked closely with many professionals to ensure people received coordinated and consistent care. For example, the registered manager visited day centres people attended to speak to staff about people's progress and what more could be done to help people develop their skills. After one such visit, a professional sent positive feedback to the registered manager. They said, "Thanks again for coming along and staying in contact so we can work closer supporting your residents. It is really appreciated."
- Another professional told us staff could provide personalised care to people because people's care records were detailed, clear and easy to follow. They said, "The care is great because there has been a great change in competency of staff and care planning."
- One person said staff were very good at supporting them in a person-centred way. They said staff talked to them and listened to what they wanted. Their relative agreed with the person's comments. The person had been trying to lose weight and staff had supported them to choose healthier meals and encouraged them to be more active. They accompanied the person to their weekly Pilates class and they encouraged them to go for walks.
- Another person's diabetes had been reversed through a good diet. Their inflamed skin condition meant this could easily be damaged by rubbing clothes and bedding. To reduce this risk, the registered manager had bought a cellular blanket that was soft, kept the person warm, while allowing good air flow. To further avoid rubbing the person's skin, staff used a hair dryer to support them to get dry after a shower.

- One professional told us the registered manager was extremely good at creating an environment that allowed people to thrive. They said, "[Registered manager] is excellent at creating wonderful experiences for people and involves families too." They said they did this by providing personalised care, setting realistic goals for people and helping them to achieve these. They also said they were particularly impressed by other things they did such as putting the right smells at Christmas to help stimulate people's senses.
- The registered manager told us for each season, they used scented plug-in air fresheners to reflect that season. For example, they would have 'cotton fresh' ones over summer and 'mulled wine' scents over the Christmas period. They told us of another example where a lavender scent had helped two people to sleep better. A member of staff had brought in a sensory light board that one person loved and found relaxing. This showed staff felt empowered to make suggestions and contributions that improved people's experiences.
- Staff told us they particularly enjoyed helping people to celebrate their birthdays and they liked to bake cakes for these occasions.

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

- People were well supported to take part in a variety of activities they enjoyed. Relatives told us people enjoyed active lives. One relative said, "There are a wide range of activities that take place both in and out of the house including keep fit, musical activities, bingo, snooker, coffee mornings, walks, shopping trips and visits to the local church. Every season and events are celebrated with decorations and activities." Another relative said, "[Person] goes out and about a lot. [Person] goes swimming, snooker club, walks, trampolining, and we meet at the local pub too."
- One professional said, "[People] have a nice and active life, tailored around what they would like. I see [people] regularly and they all seem happy."
- Staff told the registered manager's work with people's doctors and relatives to reduce or stop medicines people no longer required had been particularly beneficial to people. They said people were more alert and more likely to engage in activities. This also showed the registered manager used the STOMP (Stopping over medication of people with a learning disability autism or both) initiatives to achieve good care outcomes for people.
- The registered manager told us they decorated the service to celebrate different events like people's birthdays. They said they were looking forward to decorating the service for Christmas as people enjoyed the festive feel. One staff member told us it always looked like a 'winter wonderland'.
- People were supported to maintain close relationships with their family members and friends. Relatives could visit the service whenever they wanted. Some people were also accompanied by staff to visit their family members. Staff also supported one person to meet regularly with their friend. The person told us they enjoyed these moments.

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.

- Most people could not speak and were not able to read or write. They needed to be given information in different ways to help them understand this. People had some information about their care and support plans in easy read and pictorial formats.
- Staff understood people's different communication methods and they spoke with people at a level they could understand.

Improving care quality in response to complaints or concerns

- The service did not receive many complaints. The two complaints received since our last inspection had been dealt with well.
- Relatives told us they would speak with staff or the registered manager if they had concerns. One relative said, "I honestly cannot think of anything I am even slightly unhappy with. If there was, I would have no concerns about raising it."
- Staff told us they discussed any concerns raised by people or relatives during shift handovers and team meetings. This helped them to improve their practice.

End of life care and support

- The service supported people at the end of their lives, if this support was required.
- People's relatives were involved in their care and would communicate people's wishes.
- Care plans included information about people's end of life care wishes. This ensured people would receive effective and dignified care relevant to them.

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 now improved to outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Everyone said people were at the heart of the service, and the provider and staff continually strived to provide the very best care they could. The registered manager's attention to detail to ensure good care outcomes for people was exceptional. For example, professionals commented on the care records being one of the best they had seen in similar services. We found these were detailed and clearly described the support people needed, what staff did to meet these and the expected outcomes for people. One staff member said, "We have some of the best paperwork."
- Activities and opportunities available for people to pursue their hobbies and interests were interesting, stimulating and based on what was important to people. This ensured people had an active social life and they were not bored. Some of the activities also had positive effects on people's physical health and wellbeing. For example, one person went for walks and a Pilates class to help them lose weight.
- Everyone commented positively about the developments made to the service over the past five years. This included improvements to the premises, the quality of the management team and staff, and building on a culture that was caring and inclusive. One professional said, "The owner cares passionately about the care given to people in his service. He is genuinely caring." One relative told us, "Since the new management took over five years ago, the home has gone from strength to strength." One staff member said, "I've seen many good changes over the last few years. We've been waiting for this inspection to showcase what we do well."
- People, relatives and staff were exceptionally positive and complimentary about the registered manager's approach to care and how well they lead the staff team. One staff member said, "We are definitely well led because [registered manager] works hard to keep everything up to date. He is always here, including weekends."
- Staff were happy in their role and they said they felt valued and their contributions were appreciated. They said they worked well as a team to provide excellent care to people. Staff told us there was good communication which enabled them to do their jobs well. One staff member said, "We are a brilliant team here. There is good support from other staff too."
- Staff showed they were very compassionate in how they supported people. They had a calm and caring approach towards people. They said they treated people equally, but also acknowledged their individual characteristics.

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

- Staff gave people opportunities to comment about their care. Some people were more able to do this than others, but staff always helped people to express their views by using clear language when speaking with people.
- Surveys were used frequently and offered people, relatives and external professionals the opportunity to share their experiences about the service, and to make any suggestions for improvement. We saw extremely complimentary comments about the service, with most people rating the service 'excellent'.
- Relatives told us they were informed of any changes and developments at the service, and they always felt involved. One relative said, "[Staff] always involve families in activities and events that take place and I receive regular WhatsApp photos and messages of all the things that [person] does."
- Staff had regular meetings to discuss issues relevant to their roles. They also used a text messaging service to send messages. Staff told us they found this an effective way of sharing information.
- The registered manager was extremely proactive in engaging with local care forums to help them to provide care that is supported by good practice guidance. They took part in the Smile Awards in 2018 that helped them to introduce better ways of promoting good dental hygiene. For example, they now used smaller toothbrushes for people not able to open their mouths wide. They were also the first learning disabilities service in the area to work with an organisation that provided a health and wellbeing programme that uses physical exercise to improve people's mobility, independence, and mental wellbeing. As a result, some people were attending Pilates classes.
- Other projects the service was involved in included the recycling project and growing their own produce. People were encouraged and supported to be involved in these. The service grew a variety of vegetables which they used in their cooking. One Christmas, staff donated their gifts of chocolates and biscuits to a children's ward at a local hospital. A person using the service was dressed as Santa and supported to deliver them to the ward. This was a good way of helping people to give to others.

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 provider met their regulatory requirements by notifying CQC of important information in a timely way. They also met the legal requirement to display the inspection rating so that people and those seeking information about the service can be informed of our judgments.
- The provider and the registered manager understood their responsibility to be open and honest when things go wrong. We saw evidence of learning from the findings of their audits and improvements had been made.
- The provider was committed to continuous learning and improvement. They had robust quality monitoring systems to assess and monitor the quality of the service. Our findings showed they and the registered manager were highly driven to provide the best care for people. They used their monitoring systems to ensure they continually improved the service.

Working in partnership with others

- The registered manager regularly engaged with various professionals so that people received safe, effective and good quality care.
- The local authority that commissioned the service also checked regularly that the service was providing good care. This ensured people consistently received the support they required and expected. The service was rated good when the local authority last inspected it in May 2019. The registered manager was working towards achieving an excellent rating when the service is next inspected by the local authority.