

Guyatt House Care Ltd

# Guyatt House

## Inspection report

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Outstanding 

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: Guyatt House is registered to provide accommodation and personal care for up to nine people. There were nine people with a learning disability living in the home at the time of the inspection.

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. This was evident in the promotion of choice and control, independence and community inclusion. People's support focused on them having as many opportunities as possible, gaining new skills and growing in confidence and independence.

People's experience of using this service:

- Guyatt House provided people with an outstanding service. People led full and inclusive lives where they were supported to be in control.
- The provider has demonstrated they successfully focused on continuous improvement since our last inspection. We previously found the service met the characteristics of an outstanding service in safe and caring at our last inspection. At this inspection we found the service had improved to an Outstanding service in safe, caring, responsive and well-led domains. We received exceptional feedback on how staff supported people and went the extra mile to get people's support just right for them.
- People were at the centre of the service delivery. Staff worked exceptionally hard to find different ways of presenting information to people, using objects of reference or symbols for example. This enhanced way of communication ensured people were at the forefront of their care and support.
- People lived in an exceptionally person-centred service. The culture focussed on the promotion of people's rights to make choices and this resulted in people being valued and treated as individuals.
- People were supported by remarkable caring staff that knew them well and understood how to maximise their potential.
- People were supported by staff who recognised their rights to take measured and considered risks in order to lead their lives as they wished. People's aspirations and wishes were paramount.
- The provider continued to promote a culture of person centred support. A high-quality service and been sustained and further developed resulting in especially positive outcomes for people.
- There was a remarkable positive workplace culture and staff we spoke with provided irrefutable feedback

about the provider and management team.

Rating at last inspection: The service was rated 'Outstanding' at our last inspection on 30 March 2016. The report following that inspection was published on 15 July 2016.

Why we inspected: This was a planned inspection based on the rating at the last inspection.

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

The service was exceptionally safe

Details are in our Safe findings below.

Outstanding 

### Is the service effective?

The service was effective

Details are in our Effective findings below.

Good 

### Is the service caring?

The service was exceptionally caring

Details are in our Caring findings below.

Outstanding 

### Is the service responsive?

The service was exceptionally responsive

Details are in our Responsive findings below.

Outstanding 

### Is the service well-led?

The service was exceptionally well-led

Details are in our Well-Led findings below.

Outstanding 

# Guyatt House

## 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. 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:** The inspection team consisted of one inspector.

**Service and service type:** Guyatt House 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.

There was a registered manager in post at the time of our visits. The registered manager was also the provider and the owner of the company Guyatt House Care Ltd who runs the home. A registered manager is a person who has registered with the Care Quality Commission 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. The provider and registered manager has been referred to as the registered manager throughout this report.

**Notice of inspection:** This inspection was announced. We gave the provider 48 hours' notice that we were going to visit because the service supports people who have very complex learning disabilities and they could have become very distressed with our presence if unannounced.

**What we did:** Before the inspection we reviewed the information we held about the service and the service provider. The registered provider completed a Provider Information Return (PIR). This is information that we request that asks the provider to give some key information about the service, what the service does well and any further developments they plan to make. We looked at the notifications we had received for this service. Notifications are information about important events the service is required to send us by law.

During the inspection, we met seven people who lived at the service however due to their complex

communication styles we were unable to obtain detailed feedback verbally from everyone. We observed how people were being cared for and supported. We had contact with four relatives and five healthcare professionals. We also met and spoke with four support staff and had correspondence from a further two following our visit. We spent time with the provider, service manager and quality assurance managers during our visit.

# Is the service safe?

## Our findings

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

Outstanding: □ People were involved in developing a comprehensive and innovative approach to safeguarding, including positive risk-taking to maximise their control over their lives

Systems and processes to safeguard people from the risk of abuse

- Information about safeguarding and keeping safe continued to be a high priority and important focus at Guyatt House. The provider's philosophy to risk management placed a strong emphasis on empowering people to take and ownership of their own safety whilst respecting their rights to. take measured risks as anyone in society may.
- Safeguarding material continued to be provided in a variety of formats such as pictorial and symbol. This enabled this key information to be as accessible as possible for people. For example, one person knowingly chose to take risks in their daily life. Extensive support, provided in communication appropriate for the person, had been provided to enable them to go about their daily life, making their own choices whilst supporting them to be as safe from harm as possible. For one person in particular who had specific needs, this support was crucial support in enabling and supporting their independence.
- Staff spent time with people discussing with each person their rights to be safe and what action they should take if they ever felt unsafe. Service user meeting's continued to be held frequently and were used as a forum for staff to support people in considering action they would take if they ever felt threatened or unsafe.
- We were present at a service user meeting and saw extensive time was given to facilitate discussions around safety.
- People were regularly reminded and encouraged that they could speak out if they felt unsafe and that there were channels outside of the service open to them to do so. People were actively involved in the discussions and were able to state what actions they would take if they ever felt unsafe or threatened. This enabled and facilitated people's independence in the community.
- The service worked with an independent advocacy service and details of the service and when the advocate would be visiting the service were shared with people in pictorial and symbol format. This measured and thoughtful planning around safety with people clearly enhanced their opportunities for independence in their daily lives.

Assessing risk, safety monitoring and management

- People continued to be supported by staff who were excellent at empowering people to achieve a fulfilling life, by assessing any risks, while recognising their duty of care to keep people safe.
- A fundamental emphasis of the service and staff support was to not be risk averse, but to adopt a creative approach to risk. This enabled people to access their rights and freedoms to meaningful daily living.
- People were empowered and supported to take positive risks which encouraged and supported their independence. Staff were committed to supporting people to be autonomous and take risks of their choosing in a positive risk management way. One person chose to make certain lifestyle choices. The

support of the staff and the systems in place enabled them to do so whilst reducing the risks as much as possible.

- People living at the service were encouraged and supported to understand potential risks and take control of them. This was achieved by making information about any potential risks to them fully inclusive and accessible to people.
- For example, people were involved in the weekly safety checks at the service such as the fire safety checks. Guidance in pictorial and symbol format was in place to support them to understand the task and their responsibilities. This gave people involved responsibility and purpose in contributing to the safety of their own home.
- There were protocols in place for staff to know how to support people in an emergency. For example, people had personal emergency evacuation plans (PEEPs) in place which ensured in appropriate guidance in place in the event of a fire.

### Staffing and recruitment

- There were sufficient staff to meet people's needs in a responsive and timely manner.
- People were fully involved in the recruitment of new support staff. New staff were interviewed by the management team and if successful, were then put forward for an interview with people living at the service. People living at the service were asked to give feedback about the suitability of each candidate. This put them at the forefront of decisions about who would support them.
- This feedback was used to decide if they should be offered a job. Successful candidates were required to have Disclosure and Barring Service (DBS) check and references before they were able to start work.
- The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services. This process assured the provider that employees were of good character and had the skills and experience to support people living at the service.

### Using medicines safely

- People were empowered to take as much control of their medicines as they were able to manage. For example, one person had eye drops which a staff member administered for them, however their nasal spray they had the skills to do themselves.
- People were supported to understand what their medicines were for and when they required them.
- Medicines systems were organised and people were receiving their medicines when they should. Staff received training and an observation of their competency to support people with their medicines.
- Medicines were stored and disposed of safely. Each person had a medicine administration record (MAR) chart. We found these were completed in full and showed people received their medicines as the prescriber intended.

### Preventing and controlling infection

- There were effective systems in place to reduce the risk and spread of infection. Effective infection control and good practice was shared with people in an accessible format which enabled them to participate. A cleaning schedule was in place and each person took responsibility for areas of cleaning. During one of our visits, people were spontaneously carrying out some cleaning tasks.
- The service was visibly clean and had no odours.
- We observed the use of personal protective equipment such as gloves during our visit. Cleaning products were clearly labelled using symbol and pictorial images to help people know how and when to use them.
- The service had an effective infection control policy. Staff were trained on infection control and food hygiene.

### Learning lessons when things go wrong



- There were regular staff meetings. Any incidents or events at the service were discussed and the provider ensured lessons were learned where needed. The provider told us, "I feel, that a culture of transparency is key to learning by errors."

## 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.

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

- Staff assessed and documented people's needs and preferences in relation to their care and planned care based on this.

Staff support: induction, training, skills and experience

- Staff were skilled, knowledgeable and experienced in supporting people.
- Staff received appropriate training and support to carry out their roles effectively.
- Staff training was delivered according to individual needs. Where necessary, specialist training providers were sourced and used to ensure staff received training in line with current best practice.
- Supervisions and appraisals were carried out with staff to ensure that they had the support and development they needed to care for people.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support

- People were encouraged to have a healthy balanced diet.
- People were involved in decisions about the menus, using pictorial menu plans where needed, ● The staff were creative with new ideas to help promote people's health. At 'service user's meetings' discussions about healthy eating were held and people were encouraged to make menu selections accordingly.
- People were supported to attend healthcare appointments as needed.
- People were supported to have a good understanding of how they could have a healthier life, and how their healthcare needs could improve. Healthy eating was discussed and people were encouraged to be active.

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

- Arrangements were in place to share information between services as appropriate and for the benefit of people. For example, people had a 'hospital passport and communication plan' in place whereby relevant information about them was always available should they be taken to hospital in an emergency.

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

- The building had been suitably adapted to meet the needs of people living there. A review was underway with one person who was beginning to find the stairs a challenge.
- People's bedrooms were personalised and staff told us they were reflective of the persons choices and preferences.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- People's consent and ability to make specific decisions had been assessed and recorded in their records. Where people lacked capacity, their relatives or representatives and relevant healthcare professionals were involved to make sure decisions were made in their best interests.
- Staff had received training in MCA and DoLS and understood their responsibilities under the act.
- Where necessary, the provider had applied to the local authority for DoLS to keep people safe.
- Appropriate applications had been made and all required documentation was in place.

## 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

Outstanding: 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; equality and diversity

- Without exception, people told us they were very happy living at Guyatt House.

People's relatives continued to speak exceptionally highly about the care their family member received at Guyatt House. The service was extremely caring and supportive to people and their relatives.

- One relative told us, "In our opinion the care given to [family member] at Guyatt House has always been outstanding." Another relative said, "The care... In my estimation it has been second to none and excellent throughout."

- A healthcare professional commented, "I have always found them to have a very high standard of care. The carers know [people] well. I find I can speak to any carer and they will be aware of the [person] and the reason for my call."

- Throughout our inspection visit we continued to see that staff engaged and interacted with people regularly, showing patience and understanding. Many staff had worked at the service for a number of years and as such it was clear staff knew people extremely well and had developed close professional relationships with them.

- There was a strong, visible person-centred culture. People continued to be treated with warmth, kindness and compassion and staff had time to sit with people and chat to them. This was key in encouraging and engaging people in conversation and kept lines of communication open. This had a positive impact on each person's wellbeing.

- Staff worked with people to identify their emotions where possible and worked with them to understand their feelings, and how they could resolve those feelings. The mutual respect and understanding between people and staff had enabled one person to express something to staff that had caused them to need emotional support. This resulted in their increased confidence in accessing the community independently.

- At a recent 'service users' meeting, emotions and how they could be identified and managed was discussed.

- Following the meeting people had watched a film where the characters were named after emotions. At the next meeting, the staff had prepared laminated pictures of the characters from the film and people all looked at them and explained how each of the emotions made them feel.

- As well as viewing the film, a box of sensory items people could access had been developed. A member of staff explained, "I came up with the idea of introducing a 'happy box' as we call it which contains some sensory items like stress balls to help people with their feelings." We observed the box being shared at a 'service users' meeting with people who were interested and keen to participate. Staff told us how this helped people with addressing and managing their emotions.

- Staff knew each person's individualities, and what could cause them to be anxious or

upset. One person became restless because they were feeling unwell. A member of staff reacted straight away and immediately stopped what they were doing supported the person to another room, away from other people, where they could sit and talk in private. The person became visibly relaxed and re-joined other people.

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

- A range of individualised communication aids were being used and adapted to meet people's needs. This enabled them to communicate their views and remain being involved in decisions about their care. This ranged from a simple but very creative use of pictures, symbols and photographs to the use of a talking book which included voice recordings and photographs.
- These communication methods empowered people who had communication challenges to share their experiences.
- Staff were matched with people who shared similar interests to support with building and maintaining relationships.
- People's decision-making abilities were respected and people were able to access independent advocates. Staff recognised when people may benefit from this service and offered and arranged for people to have confidential meetings whenever necessary. This enabled people to receive impartial advice and support. Staff worked with each person and their advocate to help progress their decisions.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect and their independence was promoted and encouraged at all times.
- We saw people as they came home from various work placements engaged in their early evening routine which involved preparing their own packed lunches for the following day, choosing and helping themselves to whatever they wanted. Following this, people independently and spontaneously washed up the crockery and utensils they had used. The kitchen was a hive of busy independent activity and well received banter amongst people and staff.
- People had plentiful further opportunities to develop and maintain their independence. They were involved in their own timetable of housework jobs, all contributing and participating individually. People decided what activities they wanted to take part in such as shopping and going to a nearby town, often making spontaneous decisions that were respected by staff.
- Staff went the extra mile to support people with their personal relationships, and were sensitive and discrete to ensure people were supported to have the intimacy they wished for whilst providing support to appreciate any risks. People had been supported to understand the issues that may be associated with relationships and the implications of relationships that were not always amiable.

## Is the service responsive?

### Our findings

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

Outstanding: 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 received exceptionally and highly personalised care that was responsive to them specifically and respected their individuality.
- Without exception people's relatives told us that staff were extremely responsive to people's needs and preferences and that their care was inclusive and focussed on them.
- One relative said, "Since living at Guyatt House [person] has become happy and content, and we have been impressed with the extraordinary lengths that the Guyatt House management and staff have gone to ensure [person's] welfare, both in routine matters and whenever there have been any crisis occasioned by health or temperament."
- Another relative commented, "The atmosphere at Guyatt House is wonderful... it is a real family that has grown to look after its own members, and this is evidenced by the way [family member] seems to be able to get on well with everybody with whom [family member] comes into contact at Guyatt House, whether [people] or staff. The sympathetic handling, the careful attention to emotional and spiritual needs and the careful monitoring of medical issues, has meant that person has become a much more contented and cheerful person than at other times, and we know [person] is in safe, compassionate and supportive hands."
- Staff used innovative and creative ways of involving people in their care and support so that they were empowered and consulted. People made their own decisions and were listened to.
- Communication aids were used where needed and support was bespoke and tailored to each individual. Information within the service was extensively available in easy read symbol format.
- This included guidance on answering the telephone, accessing cleaning materials and emergency procures for example. This inclusive approach facilitated people being truly involved in their home environment.
- Assessment and care planning documentation showed all aspects of a person's needs were considered including the characteristics identified under the Equality Act. Staff did not discriminate and recognised people's diverse needs and how they expressed their sexuality. ● People who had specific support needs in this area received this sensitively and with clear guidance. People's support plans were presented in an accessible and engaging way which enabled them to understand and access their plans.
- There was key working system in place. This was used to ensure people were involved in decisions about their care and support. A keyworker is a member of staff who takes a lead role in working with a person to understand their preferences, as well as supporting them with changes in health, social and emotional needs. One person told us, "My keyworker is my best friend."
- Staff continued to be innovative in supporting people to express and manage their feelings and emotions. For example, one person had times when they wished to communicate and talk to other people at the service and times when they wished to be left alone. This was respected. The person showed us a small lanyard that they chose to wear around their neck. This stated, 'happy to talk' on one side and the other

'leave me alone'. We saw this person's decisions around their communication were recognised and respected by staff.

- Staff were continually looking for new opportunities to make people's lives interesting and enjoyable. The service took a key role in the local community who played a central role in wider support to people. This contributed to greater community inclusion.
- Staff and the provider had met with key community agencies such as the local post office, bank, shop and cafe to set systems up to support people's access safely. The system in place was referred to as the 'safe scheme' where people knew that if they feel unsafe, they could go and find someone who worked at one of these facilities. This meant that people were able to access their community independently where without the wider support network, this would not have been possible.
- Another person who followed a particular faith had established community links and was supported by the local church and then to have a Sunday roast dinner with the local parishioners. As a result of this networking the person is often in the local community for up to five to six hours on a Sunday without Guyatt House staff support.
- People were actively encouraged and supported with their hobbies, interests and personal goals. We saw people were able to spend time how they wanted. Some people had held work placements where they have contributed through volunteering roles.
- One person had recently changed their mind and wished to explore new opportunities so staff were supporting them to write their CV. This level of support was enabling new opportunities to be opened up.
- Another person, due to a change in their needs, was no longer able to attend their work placement. As a result staff were enabling them to continue by effectively bringing the work place to the person at home. The job they had been undertaking had been brought to them at home to complete and they were then supported to take their contributions back to the workplace each week. These approaches valued people's contributions to society and encouraged their full involvement.
- The provider told us, "On average three to five new activities will be introduced on a monthly basis. This month, as an example, people are wanting to go and watch a show in London. All information being presented will be individually communicated in a format that is accessible to that person. [One person] will have a talking photo album whereas [another person] will have pictures. A 'service users meeting' is a good way for decisions to be made through a shared care provision, purely on the basis of mediation."
- The provider and staff were working proactively with healthcare professionals following the NHS guidance; "Stopping over medication of people with a learning disability, autism or both" (STOMP). This initiative is looking to stop the over reliance of certain medicines because their behaviour is seen as challenging. People with a learning disability, autism or both are more likely to be given these medicines than other people. Through positive behaviour support unnecessary medicines were able to be reduced and stopped to improve people's alertness and focus.

Improving care quality in response to complaints or concerns

- There was information around the service in a pictorial format explaining how people could make a complaint if they wished.
- The provider and service manager welcomed feedback, particularly if something was bothering someone and people understood the philosophy that anything can be sorted out if they talked about it. Talking and sharing thoughts and feeling both on an individual and group basis, if people felt comfortable to do so, was actively encouraged.
- At a service user meeting pictorial and easy read guidance was used to reiterate to people what they should do if they felt unhappy about something or wished to complain. People responded with confidence when asked by staff who they would approach in that situation.
- At the time of the inspection visit one complaint had been raised by a person living at the service. The complaint was due to a wider issue and no direct failing of the provider. However, to ensure that the person

was appropriately supported and listened to, the provider and staff had supported the person to seek advocacy provision to raise their concern against the situation.

- Advocates work in partnership with people with learning difficulties supporting them to get the right support to make informed choices about their own lives and to ensure their voices and opinions are heard.

#### End of life care and support

- The service was not currently supporting anyone with end of life care.
- The provider told us people had opted not to undertake any advance plans for this aspect of their care so far.
- Staff were clear that should the need arise, people's wishes would be discussed with them, their family and any health and social care professionals to ensure full support would be provided.



## 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

Outstanding: Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The service was exceptionally well-led. We received overwhelmingly positive comments about the outstanding standards of care at the service as well as the especially skilled management.
- One relative told us, "We cannot praise this establishment highly enough. We feel really privileged that our [family member] has found a home there. [Family member] could not be anywhere better. Guyatt House fully deserves the outstanding rating that it has achieved in recent years and we feel that a similar rating is fully justified at this present time."
- Another relative said, "We have always included Guyatt House management and they have always included us in turn. Ongoing this is a very important aspect of any care establishment role in our view and is what sets Guyatt House apart."
- External professionals were consistently positive and complimentary about the provider and the running of the service. One healthcare professional told us, "I have a [relative] with 'special needs' who is likely to need residential care in the longer time. I would have no worries about them being at Guyatt House. This is probably the biggest positive thing I could say about Guyatt House."
- Staff were markedly complimentary and positive about the management and leadership which inspired them to deliver a high-quality service to people. They wholeheartedly shared the provider's vision of providing an excellent care that achieved exceptional outcomes for people.
- One staff member said, "I have never worked in a service so focused on people. It is the most person-centred service ever. That's why I work here, I love it so much. There is very little staff 'turn over' so and jobs are rarely available. I was so pleased there was a job vacancy and I grabbed it quick!"
- We found the provider was very competent and knowledgeable and was successfully leading the staff team to deliver an outstanding service to people. He spoke with passion about the service and was highly knowledgeable of people as individuals and very respectful of them and their rights.
- There was an exceptionally strong person-centred culture shared by the provider and staff. People were actively supported and encouraged to be involved in the running of the service, which was their home.
- There was a very clear vision and culture at Guyatt House that supported people's independence and right to live their lives as they wished. The provider told us the values of the service were instrumental and understood by all staff, "Family values run alongside; honesty and integrity, being courageous, adding value to the local community, being patient and taking personal responsibility."

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

- The provider and staff team were very clear about their roles, and understood quality performance, risks and regulatory requirements and the accountability afforded them.

A healthcare professional told us, "We have good communication with the staff and have regular correspondence with them. If they say they will do something, they do."

- The provider and staff implemented the Registering the Right Support guidance. The principles of Registering the Right Support recommend small services (usually supporting six people or less) however despite accommodating up to nine people, people were supported very much as individuals.
- For example, people were part of their community undertaking work, taking part in community events and using community resources. The provider promoted the principles of choice and enabled people to live their lives as every other citizen does.
- Staff opinions and ideas were welcomed. One member of staff told us, "Throughout supervisions, as this is 1-1 it allows me to express any feelings that I have to my manager and again management are extremely supportive, and our feelings are always taken into consideration. The company also provide us with counselling if we feel that we need it."
- The provider invested in staff. The continuous training and development that the staff received had embedded a culture of promoting person centred care and of reinforcing to staff the importance of recognising and respecting people's individuality.
- 'Champions' were nominated for their passion about a topic which enabled them to then receive additional training that they shared with the whole provider company. The provider told us, "We have three champions in services; communication, autism and sexual abuse/domestic violence. Champions advise across the board and attend team meetings when there is an issue." This enabled staff to truly focus in on the specific support needs of people and enabled them to understand and recognise their role in making a difference to people's lives.
- Specialist training was delivered to staff on a six-monthly basis, the provider told us, "Our last training was around complex autism and cost the company a lot for one day. For a small business this indicates just how passionate we are around developing our employees."
- The provider had implemented a scheme to enable staff to develop. The service had been given a specific budget to sponsor and mentor one staff member per year. The aim of which was to upskill and expand personal knowledge and careers.

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

- In house meetings were held amongst people who lived at the service and who wished to participate. The meetings were accessible and inclusive. People took it in turns to 'chair' the meeting, reading the agenda from information that was presented to them in written and symbol format. This meant that people could, rightfully, lead and contribute to their own meetings.
- We joined people for one of their meetings and found it was inspiring. People were fully involved and staff embraced their feedback. We had prepared some questions to ask people about their experiences of living at Guyatt House and the staff converted these into symbol format so people could fully engage with what we were asking.
- Staff team meetings were held which were an opportunity to discuss various topics such as any changes in people's needs or care, best practice and other important information related to the service. Each month a 'policy of the month' was held and time used for staff to focus on and fully understand the implications of the policy to their work.
- Regular feedback was sought from people who used the service and their relatives or advocates. This was used to inform the provider how well the service operated.
- The service had many links with the local community. Some people attended the local church and had close links with other parishioners there.
- People living at the service were involved in quality checking systems, for example by undertaking responsibility for the fire alarm testing or other maintenance checks. Their personal experiences of care and

living at the service was fundamental to driving improvement.

#### Continuous learning and improving care

- The provider had exceptionally good oversight of the service and promoted effective monitoring and accountability. Guyatt House provided an effective and exceptionally responsive and caring service founded on evidence based practice.
- The provider kept himself up to date with current thinking and the latest developments in the support of people who have a learning disability and / or autism as well as the management of services. The provider told us how he was currently undertaking a degree in senior business leadership. He also had a business mentor in place and attended registered manager forums.
- The provider had linked up with specialist online 'bloggers' to help staff gain an understanding of how it feels to be autistic. As a result, training with the 'blogger' was arranged for staff, with feedback describing it as, "Amazing."

#### Working in partnership with others

- The service worked in partnership with health and social care professionals who were involved in people`s care and used a multi-disciplinary and collaborative approach to achieve positive outcomes for people.
- One healthcare professional told us, "I have always found Guyatt House to be a very responsive service, they are quick to ask for input from appropriate professionals. I have found that they know [people] very well and support them to express their own outcomes that are important to them."
- Another healthcare professional commented, "[Guyatt House] are always keen to engage with our service through our training and formulation meetings. They are always looking at ways to ensure they give the best support to [people] and consistently take on board our feedback and recommendations."