

Prosperity Care and Wellbeing Ltd

Prosperity Care and Wellbeing

Inspection report

Denman, Harley House 29 Cambray Place Cheltenham GL50 1JN

Tel: 01242906569

Website: www.prosperitycare.co.uk

Date of inspection visit: 26 May 2022

27 May 2022

Date of publication: 18 July 2022

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

Prosperity Care and Wellbeing Ltd is a supported living service providing personal care to people who may live in single or shared occupancy households with their own tenancy agreements. This registered location supported 13 people living in nine households of different sizes (single and multiple occupancies). Some households have shared communal areas and shared care at different parts of the day. At the time of the inspection, the service was supporting four people with personal care living in three different households.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

Right Support

Staff supported people to have the maximum possible choice, independence and control over their own lives. Staff focused on people's strengths and supported them to reach their goals. People were supported by staff to pursue their interests.

Staff supported people to make decisions following best practice in decision-making. Staff communicated with people in ways that met their needs.

Staff supported people with their medicines in a way that promoted their independence and achieved the best possible health outcome. People were encouraged to play an active role in maintaining their own health and wellbeing.

Right Care

People's lives had been enriched and had greatly improved due to the consistent and personalised care that they received from staff. People's care, treatment and support plans reflected their range of needs and this promoted their wellbeing and enjoyment of life.

People were supported by staff who were caring and compassionate. There was enough appropriately skilled staff to meet people's needs and keep them safe. Staff understood people's cultural needs and promoted equality and diversity in their support for people.

Managers and staff had worked collaboratively with people, their relatives and other stakeholders to improve people's lives and to promote effective outcomes for people.

People, relatives and other stakeholders spoke highly of the service and the staff who supported them. People had flourished since being supported by Prosperity Care and Wellbeing Ltd.

Staff had supported people to overcome personal barriers, sustain their interests and try out new opportunities. These achievements had improved people's confidence, skills and wellbeing.

Right culture

The provider's values and passion about supporting people to personally grow and reach their goals and aspirations were reflected in staff practices.

There was a genuine commitment throughout the whole of the organisation to provide bespoke care and to ensure people were empowered to live a life of their choice. The principles of good 'wellbeing' was at the heart of the service.

People received high quality care, support and treatment because trained staff and specialists could meet their needs and wishes. Staff turnover was very low, which supported people to receive consistent care from staff who knew them well. Staff overwhelmingly praised the support and passion of the registered manager and management team.

There was an open and honest culture and passion to drive improvement. Incidents and concerns were investigated and acted on. People, relatives and staff felt confident to raise concerns and were assured their concerns would be acted on. The service was shaped and influenced by the people who used it. The provider used feedback to improve the quality of people's lives.

We have made a recommendation that the provider considers current guidance on how to demonstrate outstanding responsive care.

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

Why we inspected

We undertook this inspection to assess that the service is applying the principles of Right support right care right culture.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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. Good Is the service effective? The service was effective. Details are in our effective findings below. Is the service caring? Good The service was caring. Details are in our caring findings below. Is the service responsive? Good The service was 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.



Prosperity Care and Wellbeing

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in three 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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 announced.

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 26 May 2022 and ended on 30 May 2022. We visited the office location on 22 May 2022.

What we did before inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the intelligence that we held about the service and feedback from the local authority. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and three relatives about their experience of the care provided.

We spoke with 10 members of staff including the registered manager, director, compliance manager, care manager, activity and wellbeing manager, complex care Lead and four care staff.

We reviewed a range of records. This included two people's care records and medication records. We looked at staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We received feedback from four professionals who regularly visit and are in contact with the service.



Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place which safeguarded people from harm and abuse. People and relatives reported feeling safe amongst staff. One relative said, "I always feel that my [relative] is safe with his support workers."
- The provider had implemented systems which promoted an open and 'no blame culture' and encouraged people to raise any safeguarding concerns. All complaints, incidents and safeguarding concerns were analysed to determine the cause and to look at any trends or patterns. Lessons learnt were shared with staff and stakeholders to drive improvement across the service.
- Staff had training on how to recognise and report abuse and they knew how to apply it. They were aware of the provider's safeguarding policies and procedures which were reinforced during staff meetings.

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well. People's risks relating to their health such as the risk of choking and the development of pressure sores and those relating to people's emotions had been identified, assessed and were regularly reviewed.
- Staff were provided with the information and strategies needed to manage people's risks in a consistent and safe manner. People's care plan included ways to avoid or minimise the need for restricting their freedom.
- Staff knew people well which enabled them to identify and report any emerging risks such as changes in people's emotional well-being. Systems were in place for staff to discuss and be informed of current approaches on how to manage people's risks in a safe and consistent manner.
- People were supported to have as much control of their lives as possible with a balanced approach in taking risks. People's disabilities and own risks were not seen as a barrier to explore new opportunities such as completing household task or trying out new activities such as kayaking.

Staffing and recruitment

- People were supported by an established staff team which enabled people to receive consistent care. Where possible staffing levels were flexible and adjusted according to people's lifestyles and support requirements.
- One health care professional said, "There have never been missed shifts and the whole team ensure the care they are delivering is safe."
- Safe recruitment practices were followed which were based on the provider's values. The online recruitment system alerted managers of any discrepancies in staffs' employment and criminal histories which needed to be further vetted as well as right to work checks.

• People using the service were involved in the interview and selection process. People's specific care and support requirements were considered when recruiting new staff. This process empowered people to be more involved in decisions about the staff who cared for them and helped with the compatibility between people and staff.

Using medicines safely

- People received their proscribed medicines as required by staff who were trained in safe medicines management. Staff helped people to understand their medicines and supported people to make their own decisions about their medicines where possible
- Medicines care plans and medicines administration records (MAR) were completed and reflected people's medicines needs.
- Policies and protocols were in place for as required medicines, homely medicines and prescribed creams.
- Good staff engagement with people had reduced the need for excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles.

Preventing and controlling infection

- Staff supported people to keep their homes clean and hygienic. People were encouraged to carry out any cleaning and laundry requirements with the support from staff.
- Staff had been trained in safe infection control practices and completed COVID-19 testing and wore correct personal protective equipment in line with government guidance.
- Infection control audits were carried out to ensure each home was being effectively cleaned. These were reviewed weekly by the managers to ensure infection control practices were maintained.



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.

This is the first inspection for this newly registered service. This key question has been rated Good. 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 received effective care based on current best practice for people with a learning disability and/or autism. The ethos of the service was designed to promote good outcomes for people.
- The provider took considered steps as part of their initial assessment to ensure staff had the skills to support people and to ensure people lived in an environment which met their needs.
- Initial assessments were carried out with each person, their families and key professionals to ensure the provider fully understood their support requirements and likes and dislikes. A tailored plan was developed to support each person to transfer into the service at their own pace.
- People's protected characteristics, such as their culture, religion or belief were assessed and considered as part of their initial assessment to ensure people's diverse needs would be met.

Staff support: induction, training, skills and experience

- The provider had ensured staff had completed training and were supported to carry out their role effectively. New staff confirmed they had been provided with a comprehensive induction period, which reflected the requirements of the Care Certificate (nationally recognised set of care standards)
- Bespoke training had been developed where needed which focused on people's individual needs and support requirements. In house trainers and experts helped to ensure staff were able to deliver effective care and were given additional support and advice as required.
- Staff competencies had been developed around people's individual needs and routines. This ensured people's preferences and routines of their care was delivered consistently by staff.
- Staff overwhelmingly praised the training and support that they received from the management of Prosperity Care and Wellbeing Ltd. We were provided with many examples of how the provider had supported staff both personally and professionally.
- The provider had recently been accredited to deliver training in a range of health and social care subjects to their own staff and other providers.

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

- Staff supported people to plan and shop for their meals and drinks. Photographs of people's favourite meals assisted them in making their own meal choices.
- People were encouraged to eat and drink enough in line with their preferences and personal health requirements and allergies.
- Staff supported people to enjoy a balanced diet, have takeaways and eat out.
- Recommendations from speech and language therapist were in place for people at high risk of choking

and were understood and followed by the staff.

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

- People's individual needs were assessed and considered when supporting people to find a property. The provider had formed links with local housing landlords and associations to assist with this.
- People were encouraged to decorate their home to reflect their preferences and interests.
- People were supported to report any maintenance issues to their landlord and maintain their property and utility services in line with their tenancy agreements.

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

- Health Action Plans were in place for each person to help them live healthier lives and to attend routine and specialist health care appointments including screening investigations.
- Changes in people's wellbeing were quickly identified and acted on. Information regarding health concerns and input from health care professionals was recorded to ensure staff were kept informed. Staff supported people to follow the recommendations provided.
- Health care professionals stated they felt the quality of care being provided was of a high standard and confirmed they were always contacted in a timely manner and their recommendations were acted on.

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People were fully involved in making day to day decisions including bigger decisions in their life such as going on holiday.
- We observed staff supporting people to make their own choices and decisions such as where to go for lunch. This maximised people's control over their lives and enabled people to live a life which was free from any unnecessary restrictions.
- The registered manager and staff worked with people, family members and other stakeholders when significant decisions were being made on behalf of people, such as moving to a new house. Best interest meetings had been held to ensure people's rights were protected and care was delivered entirely in people's best interest. This ensured people's best interests were maintained under the MCA.



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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- Prosperity Care and Wellbeing Ltd had a dedicated staff team that were selected based on their values and ability to deliver high quality and personalised care.
- People and their relatives spoke highly of the provider and staff who cared for them. Words such as "the carers are extremely compassionate and dedicated"; "nothing is too much for them" and "I couldn't recommend them enough" were used by relatives to describe the service.
- One person who received care from the service told us the service was very 'client centred' and staff were amiable and felt part of their family.
- Another person who visited the office during the inspection and spoke to the inspector, grinned and laughed when asked about the approach of staff. This gave the inspector the assurance that the person felt happy with the staff who supported them.
- Staff had developed open and positive relationships with people and their relatives. Staff knew people well and knew how to support them in a manner which was kind and caring. This reduced the need of unnecessary interventions such as the use of medicines.

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

- People were involved in making decisions about their care and life at their own pace. Their values and wishes were respected. One person said, "The care that Prosperity provides is exceptional and they always try and think outside the box to come to a resolution if a problem arises." One relative said, "Yes I feel that his support workers are very caring."
- Through speaking to staff, it was evident that they supported people to take positive risks and overcome barriers which enabled people to have meaningful lives. Staff listened to people's views and took steps to ensure their wishes were acted on.
- Health care professionals commented on the kindness of the staff and how well they knew the people they supported.

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to reach their potential and to take part in daily activities around the home such as cleaning. We were provided with several examples of people being supported to take a balanced approach to retain their independence, live a fulfilled life and manage any associated risks.
- Staff respected and promoted people's privacy and dignity.
- Managers and staff understood the importance of keeping people's personal information confidential. Staff had access to people's care records which were current on a secure software application (app) on their mobile phones.



Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; 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's lives had been enriched by the quality of care they received.
- People's wishes and aspirations were truly central to the planning of people's support requirements. The delivery of care was underpinned by the Right Support, Right Care and Right Culture guidance as well as the provider's own principles of delivering high quality and inclusive care that was tailored to meet people's individual needs.
- People and their relatives told us the care they received was holistic and responsive to their needs. One person told us how they had been supported to maintain their hobby which had positively impacted on their physical well-being and significantly reduced their hospital admissions. They said about the provider and staff, "They are in a class of their own." They explained staff 'truly and genuinely' considered the wellbeing of all their family which in turn had helped to reduce their anxieties and worries when their health declined.
- Staff were flexible and creative in considering different ways of supporting people to manage their emotions, fears and to live their lives to the maximum which resulted in positive outcomes for people. For example, people were supported to help manage a charity event which improved people's self-esteem, monetary skills and working as a team.
- Staff spoke passionately about their role and told us everyone's wellbeing was at the heart of the service.
- Relatives spoke highly of staff and told us they always try and solve any problems efficiently and effectively. One relative said "[Name]is a lot calmer and his behaviours have definitely improved since he has been supported by Prosperity care."
- Health care professionals commended the service and said comments such as, "The care delivery is excellent and they go above and beyond other companies I work with.....they all really care about what is happening for the person and never lose sight of why they are there" and "they go above and beyond to ensure the safety of those they are supporting". They spoke of a 'can-do' approach which was skilled and always took into account the person's wishes, lifestyle and emotional well-being and how to overcome barriers and challenges.
- Staff supported people to make healthier lifestyle choices and access relevant groups to help them achieve their personal health goals.
- The ethos of 'good wellbeing' was evident across the service. The provider had invested into resources and staffing into the well-being of people, staff and the wider community. An activity and wellbeing manager and other advisors had been employed and were responsible for supporting people to reach their potential by overcoming any barriers, reduce isolation and focus on their strengths. For example, one person had been supported to achieve their personal goal to ride on a train. Overcoming this barrier had increased the

persons confidence in travelling and they were now being supported to plan and visit their relatives abroad.

- A number of accessible and inclusive activities and events had been arranged for people, their families and staff to attend such as fitness groups and paddle boarding. People had been supported to arrange events in their own home such as BBQ parties and Jubilee celebrations. These groups and events had helped people develop their social skills, confidence and develop new friendships.
- The registered manager took time to understand people's needs to enable them to match staff and consider their housing needs. The providers integrated way of working had supported people to live in their own home. The providers creative approach had enabled people to be discharged homes after long periods in hospital, inappropriate placements and prevent further hospital admissions.

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.

- People's communication needs were identified and recorded in their care plan. Information was available in a variety of formats and in a way people could understand.
- Staff had considered different ways of communicating with people. Laminated visual aids had been created for one person to help them understand the sequence of their personal care.
- One person agreed to meet the inspector in the office during the inspection. An easy booklet with a photograph of the inspector had been created to help them understand the purpose of our role.

End of life care and support

- At the time of our inspection, the service was not supporting people at the end of their life. Staff were working with people to understand their end of life wishes which were considered as part of their ongoing care planning process.
- The registered manager shared an example of how people's preferences in relation to end of life care and their cultural and spiritual needs had been met. For one person staff had provided personalised end of life care by respecting their cultural needs such as singing their favourite hymns to them during the final stages of their life. Staff continued to show compassion and dignity towards the family after the passing of their relative in preparation for the funeral. They arranged events to remember and celebrate the life of the person.

To support further development, we recommend the provider considers current guidance on how to demonstrate outstanding responsive care.

Improving care quality in response to complaints or concerns

- The provider had a system to monitor any complaints, concerns and compliments. Complaints were managed in line with the provider's policy and actions taken to resolve people's concerns.
- People and their relatives knew how to raise any issues about their support and said they were confident their concerns would be managed.
- Staff regularly sought people's views about the care they received and took action to address any concerns or requests.



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.

This is the first inspection for this newly registered service. This key question has been rated 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; Continuous learning and improving care

- Prosperity Care and Well-being Ltd was registered with CQC in March 2021. The provider had recognised that there was a lot of 'post covid fatigue' and wanted to develop a business which focused on the wellbeing of people who used the service, staff and also provide a service to the local community.
- The delivery of care, values and culture of the service was underpinned by the provider's own principles of good quality care and well-being. Their vision was to enable every person who used the service and staff members to have the opportunity for personal growth and to find people's strengths and celebrate their diversity through empowering people to arrange events and activities. For example, staff supported people to overcome barriers by arranging accessible events such as supporting people to attend music and an outdoor dancing event. This had helped people to come together and overcome some fears relating to meeting people and developing new friendships after the easement of the COVID-19 restrictions.
- The provider's values were embedded in staff practices through a comprehensive recruitment and training programme and exceptional support from the provider. Staff demonstrated a true understanding of personalised care and helped people to achieve their personalised goals such as becoming healthier through exercise and diet.
- Through robust and holistic assessments and tailored transition plans into the service, the provider had enabled people to remain in the community and prevent unnecessary hospital admissions. This approach had helped to provide people and their families with emotional stability and wellbeing.
- People, relatives and other stakeholders spoke passionately about the service and how the staff had helped people overcome their personal challenges and had looked for innovative ways of overcoming any barriers. One health care professional provided an example of how the service had risen to the challenge of meeting the unpredictable needs of a person and said, "Prosperity Care have always been one step ahead in terms of responding to emergencies or Safeguarding concerns. I have been impressed at their quickthinking in these situations."
- There was a strong culture to continually review the service, drive improvement and set new objectives and pledges which focused on the well-being of people and staff who were linked to the service. The registered manager had worked hard to create links with other providers and agencies to ensure good and sustainable outcomes for people who used the service. For example, the provider worked with other providers to provide cohesive care for one person. This collaborative and open approach had enabled the person to have more choice about their care and had reduced the risk of staffing concerns and possible safeguarding allegations.
- An activity and wellbeing manager had been employed to help raise the awareness of wellbeing across the

service and the wider population by promoting healthy lifestyles and positive mental health. The activity and wellbeing manager regularly reviewed and made recommendations after any incidents of people feeling upset and anxious such as attending a gym and being involved in holistic therapies. This strategy had significantly reduced incidents of people feeling anxious and self-harm.

- The service was shaped and influenced by a steering group (panel of people who use the service), well-being warriors (the provider's initiative to maintain a healthy workplace) and the wider community. For example, the provider had listened to people's views and had arranged a 'nightclub' event in the evening with a live DJ and bar. The event was enjoyed by many people and met the wishes of people who used the service and helped to promote equality and inclusion.
- •Staff retention was excellent as the promotion of staff wellbeing was also at the heart of the service. This enabled people to receive high quality care which was focused on their needs by an established team who knew them well.
- Managers were proud to be accredited and part of several schemes/boards which were focused on the inclusion and wellbeing of people with learning disabilities and staff.
- Prosperity Care and Well-being Ltd had been recognised as an inclusive employer and had subsequently provided employment and opportunities for staff with diverse needs and disabilities and provided higher educational placements. This had provided staff with equal opportunities, improved their self-esteem and quality of life.
- The provider was part of a local authority learning disability partnership board which helped to meet the objectives and needs of people who have a learning disability in the wider community. As part of the feedback from the board, the provider had arranged activities and/or supported people to arrange events which helped them to make friends, learn new things and keeping fit. People had been supported to help shape services for other people with learning disabilities nationally. For example, some people had been consulted in their views about accessible electric car charging stations.
- Staff overwhelmingly praised the support they received from the management team. We were provided with many examples of how the managers had provided staff with personal and professional support. For example, staff had been supported by the provider to overcome their own emotional needs as well as overcoming their own personal barriers to gain fulfilled employment. One staff member said, "Prosperity are an incredible company and employer in my opinion. All of the management and staff go above and beyond to ensure the highest standards of care are received by the people we support."
- The provider had become an accredited trainer provider in health and social care. They spoke of working openly and collaboratively with other providers to improve the skill set amongst the local health and social care workforce.
- The provider had commissioned a bespoke training platform for people to use with the aim to improve their skills and knowledge and to increase their levels of independence. For example, one person now has improved self-awareness as they were supported to access a course on understanding autism and how it may impact them.
- By attending health and social care events, workshops and training events, the registered manager was continually looking at new ways to help promote the quality of life for people such as equipment to improve people's levels of independence.

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

- The provider had a strong management and leadership structure which focused on monitoring and supporting the service to deliver person-centred, high-quality care which ensured excellent outcomes for people. All managers and staff were clear about their role and accountability and the provider's vision.
- The provider had ensured there were effective governance and communication systems in place. An

electronic software system enabled the managers to audit the service being provided. Regular meetings were held to scrutinise the audit findings, recruitment of new staff and any incidents or concerns.

- Spot checks and competency assessments were completed on staff to ensure care was of a high standard.
- The registered manager understood their legal responsibilities to notify CQC and the local authority of any significant concerns. All incidents were investigated and analysed to reduce the risk of further occurrence.
- The registered manager and leadership team were highly respected by people, their relatives, staff and other stakeholders. Staff told us they felt valued and supported and managers acted on their views and suggestions. Success and achievements within the service was celebrated at all levels.

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

- The managers and staff understood the importance of empowering people and hearing their views about how they wished to live their lives. This was done by hearing from people directly or using the steering group to express their views.
- People's protected characteristic were assessed and known by staff. Staff worked with people to engage in their local community and to help reduce the publics misconceptions about how people with learning disabilities should live their lives.
- Information and upcoming events were shared by the provider through posters and newsletter
- The results of satisfaction surveys were acted on, such as the implementation of more face to face training for staff which had been implemented as a result of a recent staff survey.
- Feedback from external stakeholders and health care professionals was used to help improve the service.

Working in partnership with others

- The registered manager and staff had developed strong working relationships with other organisations and worked collaboratively to provide good outcomes for people.
- Health care professionals spoke positively about the professionalism of the service and how they had 'thought outside the box' when supporting people with complex needs to prevent possible breakdown in people's care packages.