

Advance Housing and Support Ltd

Advance Cornwall

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

This inspection took place on 14 and 15 December 2017 and was announced 48 hours in advance in accordance with the Care Quality Commission's current procedures for inspecting domiciliary care services. This was the first inspection of Advanced Cornwall at their new registered offices.

There was a registered manager in post. 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.

Advance Cornwall is a domiciliary care service that provides care and support to people in their own homes. This includes people with general physical health needs, mental health needs, and learning disabilities. The care ranges from a few hours of support a week up to 24 hour care for people in supported living.

A supported living service is one where people live in their own home and receive care and support in order to promote their independence. People have tenancy agreements with Advanced Housing and Support Ltd, and receive their care and support from the domiciliary care agency. As the housing and care arrangements are separate, people can choose to change their care provider without losing their home.

Staff were enthusiastic and passionate about the service. Comments included, "I have come to this type of work later in my career and I can honestly say that I love it and find my job very satisfying and rewarding." People were supported by a stable and consistent staff team who knew people well and had received training specific to their needs. Staff told us they enjoyed their work and were well supported through supervision, appraisals and training.

People were involved in choosing the staff that supported them. Efforts were made to match staff with people by identifying any shared interests and hobbies.

People told us they felt safe with the staff who supported them. Staff were confident about the action to take if they had any safeguarding concerns and were confident the registered manager would follow up any worries they might have. Risk assessments clearly identified any risk and gave staff guidance on how to minimise the risk. They were designed to keep people and staff safe while allowing people to develop and maintain their independence.

Care records were up to date, had been regularly reviewed and accurately reflected the person's care and support needs. The person's care plan was presented in written and pictorial formats to enable them to read their plan and be involved in any changes or updates. Details of how the person wished to be supported with their care needs were highly personalised and provided clear information to enable staff to provide appropriate and effective support.

Staff had high expectations for people and were positive in their attitude. Staff were respectful of the fact they were working in people's homes. One staff member said "I understand that I am a guest here. I wouldn't like someone to come into my home without my wishes being respected so that's always at the front of my mind."

The service offered flexible support to people and were able to adapt in order to meet people's needs and support them as they wanted. For example, by providing more or less support according to what each person wanted.

The registered managers spoke highly of the staff team describing them as committed and enthusiastic in their approach to work. Staff told us they felt involved in the development of the service and that management listened to any ideas and suggestions they had and took them on board.

The service was well led and all of the staff were motivated and keen to ensure the care needs of the person they were supporting were met. The management team had a clear set of values which was also apparent in our discussions with staff. Advance Cornwall had a clear set of values and visions. The organisation works to achieve the PRIDE (Partnership, Respect, Innovation, Drive and Efficiency) principles.

The service had a registered manager in post. 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.

People's feedback about their experience of the service was positive. People said staff treated them respectfully and asked them how they wanted their care and support to be provided. People told us they had their care visits as planned. Staff arrived on time and stayed for the allotted time. People confirmed there was a stable staff team and that care was provided by familiar faces.

Staff were knowledgeable about the people they cared for and responded appropriately as people's needs changed. Staff spoke positively about the people they supported and were motivated to provide an individualised service in line with people's needs and goals.

People had a care plan that provided staff with direction and guidance about how to meet people's individual needs and wishes. Care plans were regularly reviewed and any changes in people's needs were communicated to staff.

Assessments were carried out to identify any risks to the person using the service and to the staff supporting them. This included any environmental risks in people's homes and any risks in relation to the care and support needs of the person. People told us they were involved in decisions about their care and were aware of their care plans.

The service worked successfully with healthcare services to ensure people's health care needs were met and had supported people to access services from a variety of healthcare professionals including GPs, dentists

and other medical services to provide additional support when required. Health and social care professionals were mainly positive about the service, comments included, "In my opinion the current managers are competent and professional" and "I have had no reason to be unhappy with the management currently." One health and social care professional commented that information about a person's communication aid had not been implemented appropriately. The registered manager provided further information about the issue following the inspection including evidence that the person's communication support plan identified the use of several alternative methods of communicating with the customer using their preferred styles of communicating.

Staff were recruited safely, which helped ensure they were suitable to work with vulnerable people. Staff had received training in how to recognise and report abuse. All were clear about how to report any concerns and were confident that any allegations made would be fully investigated to help ensure people were protected.

Staff received appropriate training and supervision. New staff received an induction, which incorporated the care certificate. All staff received an appraisal of their work. Staff comments included, "The training is very good. We are always doing training and we are encouraged to do further training when it's required to meet the needs of the people we support" and "Advance have provided me with the training necessary to do my job. They have also been open to any of my suggestions for training for myself and our team."

Accidents and incidents were accurately recorded and reported and any lessons learned were shared with staff. The service learned from any mistakes and used these as an opportunity to raise standards. There was a culture of openness and honesty and staff felt able to raise concerns or suggestions.

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 safe. There were sufficient numbers of suitably qualified staff to keep the person using the service safe and meet their needs.

Staff completed a thorough recruitment process to ensure they had the appropriate skills and knowledge.

Staff knew how to recognise and report the signs of abuse.

Good 

Is the service effective?

The service was effective. Staff were appropriately trained and there were robust procedures in place for the induction of new staff.

Staff were matched to the people they supported according to their own skills and interests and the needs of the person.

The registered manager and staff understood the legal requirements of the Mental Capacity Act 2005 and the associated Deprivation of Liberty Safeguards.

Good 

Is the service caring?

The service was caring. The stable staff team had developed caring and supportive relationships with people using the service.

Staff knew the people they were caring for well and communicated with them effectively.

People's privacy was respected. Staff encouraged them to be as independent as possible and their achievements were recognised.

Good 

Is the service responsive?

The service was responsive to people's needs. Staff found creative ways to enable people to live life to the full and do things they enjoyed. Staff promoted people's specific interests

Good 

and supported people to achieve their ambitions.

Staff responded swiftly when people required support. Staff also responded promptly to any changes in people's needs.

People were encouraged to fully participate in the planning and assessment of their care. Care plans were personalised and informed and guided staff in how to provide consistent care to the people they supported.

Information about how to complain was readily available and in formats people could access.

Is the service well-led?

The service was well-led. There was a management structure in the service which provided clear lines of responsibility and accountability.

There was a positive culture in the service, the management team provided strong leadership and led by example.

There were effective quality assurance arrangements at the service in order to raise standards and drive improvements.

Good ●

Advance Cornwall

Detailed findings

Background to this inspection

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

This inspection took place on 14 and 15 December 2017 and was announced. The provider was given two days' notice because the location provides a domiciliary care service. As the staff team was small we needed to ensure that they would be available. We asked people if they would like to meet with us, and with their agreement we met with four people in their homes. The inspection was conducted by one adult social care inspector.

Before the inspection we reviewed information we kept about the service, this included notifications of incidents. A notification is information about important events which the service is required to send us by law. This enabled us to ensure we were addressing potential areas of concern. We reviewed the Provider Information Record (PIR). The PIR provides key information about the service, what the service does well and the improvements the provider plans to make.

During the inspection we used a range of methods to help us make our judgements. This included talking to five people that used the service, interviewing three members of staff, pathway tracking (reading people's care plans, and other records kept about them) and we reviewed other records about how the service was managed.

We looked at a range of records including three care plans, records about the operation of the medicines system, three staff personnel files, and other records about the management of the service. After the inspection we contacted a further six staff members and five professionals who were external to the service for their feedback.

Our findings

With their agreement, we visited with four people who received a service from Advance Cornwall. People told us they felt safe and it was clear people enjoyed the company of staff who supported them.

People told us they were supported by staff they knew. Staff were provided with photographic identification badges to enable people to confirm the identity of carers. People said new carers were introduced by a member of staff who they already knew. People told us staff were punctual and staff were always present when needed.

People were supported by staff who understood how to recognise and report signs of abuse or mistreatment. Safeguarding and whistleblowing policies and procedures were available for staff to access and safeguarding was a standard agenda item at staff meetings.

Staff had received training on how to recognise the various forms of abuse, which was regularly updated and refreshed. There was an open and transparent culture in which staff were encouraged to report any concerns. The service had a whistle blowing policy so if staff had concerns they could report these without feeling there would be any unreasonable action for making valid criticisms of the service. Where concerns had been expressed about the service; for example if there had been safeguarding investigations; the registered persons had carried out, or co-operated fully with these.

Staff were aware of the process to follow should they be concerned or have suspicions someone may be at risk of abuse. The registered manager told us if they had concerns about people's welfare they liaised with external professionals as necessary, and had submitted safeguarding referrals when it was appropriate.

Staff were aware of the reporting process for any accidents or incidents. Records showed that appropriate action had been taken and where necessary changes had been made to reduce the risk of a re-occurrence of the incident. Where incidents had occurred the service had used these to make improvements and any lessons learned had been shared with staff. A staff member said; "We learn as a team and there are lots of systems in place to share this. For example, we have a company intranet and regular team meetings." A multi-professional health and social care professional familiar with the service commented, "I consider Advance Care Cornwall to be both a safe and caring service for the people I have worked with who have a care and support package with them."

Risk assessments were carried out to identify any risks to the person using the service and to the staff supporting them. This included any environmental risks in people's homes and any risks in relation to the

care and support needs of the person. For example, the risks associated with undertaking community activities such as attending music concerts. A person told us how much they had enjoyed attending a concert and explained that staff had advised them not to stay at the front of the arena due to the risk of being crushed. The person understood the risks involved and was happy to enjoy the concert at a safe distance.

There was a stable staff team which provided people with continuity of care. This enabled staff to build positive working relationships with people over time. People confirmed the same group of people provided their support. The service did not use any bank or agency staff as they were able to cover all the required care visits from their existing pool of staff.

Staff told us they had never had concerns about colleagues working practices. They were a close team and regularly discussed working practices and how to support people safely. Sometimes people acted in a way which could put themselves, or others, at risk. Staff had received training on how to support people at these times and were confident about their ability to keep them safe

There were sufficient numbers of staff available to keep people safe. Staffing levels were determined by the number of people using the service and their needs. The service recruited staff to match the needs of people using the service and new care packages were only accepted if suitable staff were available.

The service produced a staff rota which recorded details of people's visit times, and which staff would provide the visit. Advance Cornwall currently provides support to people during the day and evening. During the night another care agency provides on call support to people in their own homes. People confirmed they had been given the telephone numbers for the service so they could ring should they have a query.

People were supported by staff who had been safely recruited. Recruitment checks were in place and demonstrated that the staff employed had satisfactory skills and knowledge needed to care for people. All staff files contained appropriate checks, such as two satisfactory references and a Disclosure and Barring Service (DBS) check. A staff member commented, "I consider this service to be very safe. There is a great staff team, who were all carefully selected using a recruitment process that also involves people who use the service."

People were safely supported with their medicines if required. The arrangements for the prompting of and administration of medicines were robust. The registered manager told us, "Our approach is that people manage their own medication unless the risks associated with this are not manageable." Support plans clearly stated what medicines were prescribed and the level of support people would need to take them. Medicine administration records (MAR) were kept as necessary to record when people took their medicines, if this was part of their care package. We saw these were completed appropriately and audited regularly. All staff had received training in the administration of medicines which was regularly refreshed. The service had a medicines policy which was accessible to staff.

There were effective systems in place to help people manage their finances. The person along with staff developed a care plan that specified how the person wished to be supported in managing their money and how it would be monitored.

The service had a contingency plan in place to manage emergencies. Risks to people, in the event of an emergency, had been assessed and rated, in order to identify who would be at the highest risk. A personal emergency evacuation plan (PEEP) had been completed for people. The registered manager told us, "Customers have a business continuity plan outlining what actions to take in an emergency. We actively teach safety in the home and community when supporting people and where appropriate have introduced

people to the fire and police services." The service also had a 'missing person' procedure in place which provided guidance about action required in the event of a person going missing. People were protected as robust processes were in place to manage emergencies.

Staff followed good infection control practices and were provided with PPE (personal protective equipment) such as gloves, hand gel and aprons. Staff had received training on infection control and understood their role in preventing the spread of infection.

Care records were stored securely in the office and a copy of each care plan was also kept by the person in their home. These records were accurate, complete, legible and contained details of people's current needs and wishes.

Our findings

People's physical, mental health and social needs were holistically assessed before Advance Cornwall accepted the care package. Assessments assisted staff to develop a care plan for the person so care was delivered in line with current legislation, standards and guidance.

People received care and support from staff that were well trained, supported and knew their needs and preferences well. The registered manager and service manager, shared the view that Advanced Cornwall staff were committed to their work, and were motivated to provide high quality care. Comments from care staff included; "It is a very rewarding job", "I love my job" and "I have worked in care for 18 years and I personally feel that Advance is the best place I have worked regarding how they communicate with their staff. It is also so important to feel that senior management are accessible and approachable, this is definitely the case at Advance."

Nobody felt they had been subject to any discriminatory practice. For example, on the grounds of their gender, race, sexuality, disability or age. The registered manager showed a keen awareness for the diversity of people's backgrounds and preferences. We were shown a poster for an upcoming diversity event which aimed to promote and celebrate 'an alternative Christmas dinner'. The theme of the event was discovering other cultural traditions as well as Christian including Jewish and Indian holiday celebrations.

Staff teams were built around the person. The person's hobbies and interests were identified and then they were matched with staff who had similar interests. For example, people with an interest in a particular hobby would, wherever possible, be matched with staff with similar interests. This helped the development of positive relationships between people.

Staff had appropriate skills, knowledge and experience to deliver effective care and support. People who used the service told us they felt staff were well trained and supported them appropriately. Health and social care professionals familiar with the service commented, "The support team are approachable and open to suggestions" and, "In my experience Advance Care have demonstrated good timely communication when working with multi-professional agencies."

Staff completed an induction when they commenced employment this included shadowing more experienced members of staff. Shadowing continued until the person and the service felt confident that they were comfortable and competent to carry out their role. All staff who were new to the service completed the care certificate. The care certificate is an identified set of national standards that health and social care

workers should follow when they are new to work in the care sector.

Records showed staff received comprehensive training which enabled them to carry out their roles effectively. Staff told us, "The training is very good. We are always doing training and we are encouraged to do further training when it's required to meet the needs of the people we support" and "Advance have provided me with the training necessary to do my job. They have also been open to any of my suggestions for training for myself and our team."

Staff told us they felt supported in their roles by colleagues and senior staff. The service had supported one staff member by adapting customer support plans in order to make them accessible because the staff member had a specific learning need which meant written reports were clearer when printed in a specific way.

Staff received regular supervisions. Supervision is a process where members of staff meet with a supervisor to discuss their performance, any goals for the future, and training and development needs. These took place formally approximately every month and provided an opportunity for staff to identify their training needs and discuss working practices with their line manager. Staff told us they felt able to ask for support or advice at other times.

People were supported to maintain a healthy lifestyle where this was part of their care plan. People told us staff supported them with their food shopping and assisted them with the preparation and cooking of their meals. Staff had received training in food hygiene, and were aware of good practices when it came to food preparation and storage.

The service worked closely with other health professionals to help ensure people had access to the services they required to maintain their health. Health and social care professionals told us staff had the knowledge required to meet the person's care and support needs. Staff encouraged people to maintain their health by supporting people to access services from a variety of healthcare professionals including GPs and dentists and medical appointments to provide additional support when required. A summary of people's care plans was available to accompany them in instances such as a hospital admission.

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. The registered manager and staff had received training on the MCA. There was also a policy on the MCA which was accessible to staff. Staff we spoke with were knowledgeable about how the Act applied to their role.

Mental capacity assessments and records of best interest meetings were recorded where appropriate. For example, one person had restrictions around their ability to access food due to a health condition and the service had ensured full documentation and accordance with the Mental Capacity Act (2005) had been followed.



Our findings

People told us they felt the service provided consistently good care and that staff were kind and caring in their attitude towards the people they supported, and their families. Staff commented, "I understand that I am a guest here. I wouldn't like someone to come into my home without my wishes being respected so that's always at the front of my mind." People said they were respected and valued as individuals and had confidence in Advance Cornwall to provide their care package. Comments from people included; "They [staff] are kind" and "I like the staff, they are very helpful to me" and "They are all (staff) friendly and nice people."

Staff were kind, compassionate and caring toward the people they cared for. All staff we spoke with were enthusiastic about their role in supporting people. Comments from staff included; "I love supporting people" and "I love working here." Staff knew the needs of the people they supported well and spoke about people with warmth and fondness. Staff were able to describe in detail, peoples' likes and dislikes, background and history. In our visits with people who received a service from Advance Cornwall, we saw how comfortable people were with the staff who supported them. One person shared photographs of a special occasion and pointed out that some staff had attended the event and said this had made them happy. One staff member told us they had supported a person to go on holiday and the person told us how much they had enjoyed this.

The service supported people to express their views and be actively involved in making decisions about their care, support and treatment as far as was possible. Care records detailed how people preferred to communicate their wishes and what certain gestures or behaviours conveyed. Staff had a good understanding of the peoples' communication methods and used this knowledge to enable them to make their own decisions about their daily lives.

People told us they knew what was in their care plan and were routinely involved in reviews. A customer satisfaction survey was carried out annually to request feedback from people about how the service was operating.

Staff met with people every month to review the care provided and discuss any changes to the running of the service. Peoples' care plans were presented written and pictorially to enable them to understand their plan and be involved in any changes or updates.

Support was provided by a small, consistent, motivated and well trained staff team. The registered and

service manager had recognised the importance of staff consistency for people as well as respecting their wishes to have a mixture of different care staff. Rotas were carefully planned to ensure staff who knew the person's needs were allocated, while varying staff sufficiently so their social and emotional needs were met.

The culture within the staff team was positive. From discussions with staff it was clear that respect for individuals was at the heart of the service's values. A staff member commented, "I feel that it is a very caring service, this has been shown time and time again, staff all rally together to support customers to have additional support when they are not well or in hospital." We heard how staff worked together as a team to ensure that a person who was admitted to hospital was supported at all times throughout their hospital stay.

People's religious and cultural needs were respected and supported. There was information about this in people's care records.

Information for people who used the service, and their families, about community organisations and advocacy services that could provide independent support and advice was available. The registered manager told us this was something they discussed during the initial assessment. When necessary people were signposted and supported to contact other agencies such as social services and Citizens Advice when appropriate.

Our findings

The service was highly responsive to people's needs. Staff found creative ways to enable people to live life to the full and do things they enjoyed. Staff promoted people's specific interests and supported people to achieve their ambitions. For example, people were supported to participate in activities of special interest to them, including further education and work. We heard about the success two people had finding both paid and voluntary work in their local community.

One person wanted to go on holiday with their partner. Staff accompanied both persons on this holiday which would not have been possible without support. The person told us how much they had loved the holiday and shared photographs and memories of all of the activities they had shared. They told us how much they were looking forward to going away again and this was one of their goals for the next year.

People were supported to maintain their hobbies and interests. One person had an interest in railways and in model making. The service had sourced a local model railway company where the person had successfully taken up a voluntary role. The person told us with great pride that they really enjoyed their role and had contributed some of their own model work to be exhibited in a model exhibition that was open to the public. Another person with a passion for photography had been supported to find a photography group to help develop their hobby. The registered manager told us about weekly events that were offered to people to engage in learning new skills they were interested in, such as cooking sessions. In addition, people had asked to be linked up with the local police beat officer and had spent time with them discussing how to stay safe in their local community.

The service worked with people to host a number of national and local 'customer conferences' aimed to inform and involve people in how their service was developed and operated. One person told us about a recent conference they had attended at the National Marine Aquarium in Plymouth in October 2017. We heard they had been invited to attend up to five workshops during the day which they said they had really enjoyed. The day had provided them with information about services available to them as well as a chance to meet other people who also used Advance Care and enjoy a tour around the aquarium.

Staff responded swiftly when people required their support. Staff also responded promptly to any changes in people's needs. This included increasing visits or visit times if required, for example, due to illness or injury. Staff told us they had worked closely together to support a person throughout an emergency hospital admission which had involved the staff team staying with the person throughout the night as well as during the day to ensure the person was as settled as possible.

Before, or as soon as possible after, people started using the service the registered manager and/or senior staff visited them to assess their needs and discuss how the service could meet their wishes and expectations. People, or those with authority to act on their behalf, had contributed to planning their care and support, and this had taken into account each person's strengths, levels of independence and quality of life. A person who used the service told us, "I am very happy with my support. I really enjoy living here." From these assessments care plans were developed, with the person, to agree how they would like their care and support to be provided.

Information provided by the service outlined that people were encouraged to fully participate in the planning and assessment of their care. The registered manager told us, "Advance actively promotes independence by ensuring that choice and control is given to the people we are supporting." Care planning was individualised to each person and recorded in each person's 'care planning journey pack'. This clearly identified outcome based support goals, as decided by the individual and reflected each person's wishes and preferences about how their support should be delivered. Peoples' care plans reflected their physical, mental, emotional and social needs and took into account relevant protected characteristics under the Equality Act. We heard how staff had provided support to a person to make links with the LGBT community.

Care documentation informed staff of the person's background where people consented to this being used. It identified the person's communication needs and this was shared with other agencies when necessary. For example, where people had a cognitive or learning difficulty or other impairment such as sight and/or hearing this was clearly set out in the care plan with guidance for staff about the most appropriate way to communicate with the person.

Care plans were reviewed monthly and updated as people's needs changed. Any changes to care plans or risk assessments were communicated effectively to staff and other multi-professional agencies appropriately. An external professional who had worked to support a person alongside Advance Cornwall confirmed they had found the service to be professional and had ensured appropriate communication to best support the person.

A complete re-assessment of the persons' needs and wishes was carried out annually with people and their families. Copies of people's care plans were kept in their homes and people were aware of them.

People we spoke with confirmed that care visits were on time and that staff stayed for the duration of their allotted time. If staff were ever going to be late, they phoned ahead to let the person know.

Information about how to make a complaint was kept in people's records and in their home and was also available in an 'Easy read' format. People we spoke with were aware of this and told us they were confident any complaints would be dealt with to their satisfaction. People were provided with a copy of the 'How to complain' procedure. The registered manager told us, "We encourage the people we support and their relatives, to raise concerns with us and we respond to this feedback immediately. Complaints can be made in any format, written or by speaking to someone."

People who used the service told us they knew how to make a complaint and/or raise any concerns and said they were comfortable contacting staff to raise any issues they had. One person told us, "If I had to complain, it would be easy, I'd just ring the office." People told us they were satisfied that when they did raise a complaint it was dealt with appropriately and sensitively. No-one we spoke with said they had ever experienced discrimination, harassment or disadvantage as a result of raising a complaint.

Although there had been no recent complaints at the service, there was a system in place to manage and

investigate any complaints. Advance Care had a compliments and complaints forum which monitored the compliments and concerns received with a view to learning from any issues raised. This was underpinned by a policy and procedure which staff were aware of.

Staff supported people at the end of their life. This included working alongside community nurses to help ensure people experienced a comfortable and pain free death. When appropriate, people's preferences and choices for their end of life care were included in their care plans including information about where they wished to die and their spiritual and cultural needs. These were clearly recorded, communicated, kept under review and acted on. For example, where a person wished to live out their lives at home rather than going into the hospital this was clearly documented and understood by the service who worked with the person and their family to support and respect the person's wishes.



Our findings

Feedback from people who received the service was positive; people reported that they were happy and satisfied with the care and support provided by Advance Cornwall.

People and staff told us they were involved in developing and running the service at an individual and organisational level. For example, people who received a service were invited to be involved in the recruitment of new staff and were actively involved in attending both national and local customer conferences to discuss how the service was operating and plans for its development. Feedback collated following the last conference in Plymouth in October 2017 showed 95% of people who had attended rated the conference as 'good' or 'excellent'. Advance Cornwall have stated, "We remain committed to ensuring our customers get to share their views about our services and meet other customers, making connections and getting access to useful information."

There was a positive culture in the service, the management team provided strong leadership and led by example. The service was well led and all of the staff were highly motivated and keen to ensure the care needs of the people they were supporting were met. Staff commented, "I think the service is well managed and supportive to staff; management are accessible, knowledgeable, responsive and understanding", "Overall I think that Advance are a great company to work for, customers are the focus of everything, they are respected, listen to and valued" and, "Advance are the best company I have ever worked for in my long career in care. I feel very lucky and privileged to be part of an amazing local supportive team, with equally amazing customers."

Advance Cornwall had a clear set of values and visions. The organisation works to achieve the PRIDE (partnership, respect, Innovation, Drive and Efficiency) principles. This is described in the PIR as 'a core part of our recruitment process, supervision and policies and procedures with staff at all levels held accountable to these values.' The values underpinning the service were developed to foster and nurture positive experiences for people supported by Advance Cornwall and to cultivate positive relationships with colleagues and stakeholders.

There was a management structure in the service which provided clear lines of responsibility and accountability. The registered provider for the service is Advance Housing and Support Ltd which is a national organisation. The manager of the Advance Cornwall service had overall responsibility for the day to day running of the service with the support from their line manager and Directors. The registered manager receives support from the service manager locally. The service also received support from many

departments such as finance, Human Resources (HR), training and quality auditing, to help with the running of the organisation and where they could access any advice or guidance. Staff attended conferences and seminars on learning disability topics so they were able to keep up to date on developments in the field.

Staff said they were supported by the managers and were aware of their responsibility to share any concerns about the person who used the service. The service had an 'I'm not proud' confidential phone line to encourage staff to report anything which was not in keeping with the values of the organisation.

Staff told us they were encouraged to make suggestions regarding how improvements could be made to the quality of care and support offered by the service. They did this through informal conversations with managers, regular formal supervision and staff team meetings. Staff told us these were useful and gave them an opportunity to exchange any ideas for the development of the service. A staff member told us, "I have always found that Advance are very open to suggestions; in fact I feel that they encourage this from all the staff from support workers up. I personally have come up with different ideas, changes to forms etc. these have always been looked at and incorporated." Staff told us the managers were "really supportive". Staff said they felt valued by the managers and they knew their personal circumstances and supported them in this aspect to.

The service worked successfully with healthcare services to ensure people's health care needs were met and had supported people to access services from a variety of healthcare professionals including GPs, dentists and other medical services to provide additional support when required. Health and social care professionals were mainly positive about the service, comments included, "In my opinion the current managers are competent and professional" and "I have had no reason to be unhappy with the management currently." One health and social care professional commented that information about a person's communication aid had not been implemented appropriately. The registered manager provided further information about the issue following the inspection including evidence that the person's communication support plan identified the use of several alternative methods of communicating with the customer using their preferred styles of communicating.

Records showed the service manager met face to face with the people who used the service to ask them about their views of the support they received, and if any changes to their care plans were needed. People had also been asked for their views on the service via a questionnaire. This was in easy read format and used simple text and pictures. This meant it was easier for people with limited literacy skills to use it.

There were effective quality assurance arrangements at the service in order to raise standards and drive improvements. The service's approach to quality assurance included completion of an annual survey. The results of the most recent survey had been positive. There was also a system of audits to ensure quality in all areas of the service was checked, maintained, and where necessary improved. Audits that were regularly completed included checking care practice. For example, checking records demonstrated people received their visits on time; checking medication records; monitoring care plans were regularly reviewed, monitoring accidents and incidents and people's finance arrangements where appropriate.

There was a culture of openness and honesty. Feedback on the service was encouraged and sought through a number of forums, including staff survey and team meetings. The service also provided staff with an anonymous staff questionnaire to report any concerns. The organisation also held a safeguarding panel so that any cases that had a safeguarding element could be discussed at national level. From this any learning that came out of these cases would then be cascaded to all Advanced Housing and Support Ltd services throughout the country. This demonstrated the importance that the provider places on this element of care.

