

## Choice Support

# MCCH (Hermitage Court)

### Inspection report

One Hermitage Court  
Hermitage Lane  
Maidstone  
Kent  
ME16 9NT

Date of inspection visit:  
22 November 2018  
23 November 2018  
28 November 2018

Tel: 01622722400  
Website: [www.mcch.co.uk](http://www.mcch.co.uk)

### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

This inspection took place on 22, 23 and 28 November 2018 and was announced.

MCCH (Hermitage Court) provides care and support to people living in 'supported living' settings, so that they can live in their own home 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. At the time of our inspection 111 people were receiving support from the organisation across the South East and London areas. It provides a service to a range of people including adults that have learning disabilities, physical disabilities, profound and multiple disabilities and autism spectrum disorder.

At our last inspection on 16 and 17 February 2016 we rated the service good overall with the safe key question rated as requires improvement. We recommended that gaps in staff's employment records were explored and recorded. A comprehensive audit of the entire workforce recruitment records had been completed. At this inspection we found that additional improvements had been made, sustained and embedded; the service was now rated as 'outstanding' overall and in the responsive and well-led key questions. The safe key question had improved to good. The evidence continued to support the rating of good in the effective and caring key questions.

The individual services had been developed and designed in line with the values that underpin the 'Registering the Right Support' and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service could live as ordinary a life as any citizen. These values were seen in practice throughout each service.

There were two registered managers in place that covered different geographical areas. 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 receiving support from MCCH (Hermitage Court) received highly individualised person-centred care. There were innovative and creative ways of promoting people's well-being and self worth. People were supported to achieve positive outcomes and fulfil their dreams and aspirations, such as moving on to independent living and overcoming communication barriers.

Support plans were detailed and personalised to meet people's needs. People were supported to have a full and meaningful life. People were supported to fulfil their goals to enhance their well-being. Staff went over and above to make sure people had opportunities to meet new people, make friends and build relationships.

People were empowered to take ownership over their safety. The safety of people was promoted and links were made with the local community professionals to protect people. Keeping people safe and protecting them from harm and abuse was at the forefront of people and staffs' minds. Staff worked alongside the local authority safeguarding team to promote people's understanding about their safety.

The vision and values of the organisation played an integral role to ensure people were at the heart of the organisation. These had been integrated into everyday practice, people living with learning disabilities were able to achieve what they wanted in their lives and had the right support overcome obstacles to achieve positive outcomes.

People were supported to make decisions about their care and support. People were given maximum choice and control over their lives. There was clear and detailed guidance for staff on how to meet people's individual needs and to support them to develop their confidence and have their preferences met.

The recruitment of staff was individualised and people were involved in the recruitment of their staff so they had a say about who might support them. There were enough staff to meet people's needs and staffing levels were based around people's social and health appointments and were flexible and responsive. Staff were trained to meet people's needs including their specific needs. The organisation promoted a supportive, inclusive and open culture amongst its workforce.

Staff were highly motivated and were passionate about providing people with high quality, compassionate care with regard to people's individual wishes and support needs. We saw that people were relaxed and staff demonstrated a caring attitude.

There were robust quality assurance systems in place, which monitored the individual services, identifying potential areas for improvement, and actions were taken to improve these.

A large variety of communication methods and techniques were used to promote people's choices about their lives. People's emotional support had been clearly documented and was followed by staff.

People's privacy and dignity were highly respected, and this also was reflected in the detailed guidance provided within people's support plans.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. Staff had followed the Code of Practice in relation to the Mental Capacity Act 2005 (MCA). We observed staff treated people as equals and individuals, offering them options whenever they engaged with them. Staff always endeavoured to enable people to maintain their independence and to make their own decisions.

People were supported to follow healthy diets, and this had a positive impact on their wellbeing. They were also supported to access healthcare services when they needed to.

People were actively encouraged to raise any concerns or complaints they had. People's views were actively sought and acted on to improve the quality of the service that people received.

Further information is in the detailed findings below.

## 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.

There was an innovative approach to people's safety. People were supported to take ownership over their safety whilst out in the local community.

People were supported to take positive risks and have control over their lives.

People were involved in the recruitment of their staff team. Staff were recruited safely.

People were supported to manage their medicines.

People were supported to understand the importance of managing the risk of infection. People were supported to promote good food hygiene procedures.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

People were supported to achieve their dreams and aspirations and gain confidence to have fulfilling lives.

People were supported to have an enhanced sense of well-being and self-worth.

People were supported to play an active role within their local community.

Care records were personalised to guide staff to provide highly responsive, person centred and holistic support.

People were actively encouraged to raise any concerns they may have or make suggestions about the service they received. The organisation used technology to promote people's choice and control.

People were supported to prepare their wishes for their care and support at the end of their life.

### **Is the service well-led?**

The service was exceptionally well-led.

People were at the heart of the organisation. People's views and suggestions were used to develop the culture, vision and values.

There was excellent leadership in place and a structure that supported staff at each level. The workforce spoke passionately and were committed to improving people's outcomes.

Staff were involved, well supported, worked well together and were highly motivated to support people to live fulfilled lives.

There was a comprehensive system in place that involved people that used the organisation to monitor and maintain the high levels of quality within each service.

The management team and staff were continually striving for improvement at every opportunity.

The registered managers and the management team ensured their knowledge and skills were current and following best practice.

**Outstanding** 

# MCCH (Hermitage Court)

## Detailed findings

### Background to this inspection

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

This comprehensive inspection took place on 22, 23 and 28 November 2018 and was announced. We gave the registered manager four days' notice of the inspection visit because a focus group of people using the service needed to be arranged. The organisation provided care and support to people living in supported living services out in the community.

Inspection site visit activity started on 22 November 2018 and ended on 28 November 2018. It included a focus group with four people using the service and visits to six people living within three supported living services. We visited the registered office location on 22 and 23 November 2018 to see the registered managers and staff; and to review care records and documentation relating to staff and quality assurance.

Before our inspection we reviewed the information available to us about this service. The registered managers had completed a Provider Information Return (PIR). The PIR is a form that we ask providers to complete at least once annually to give us some key information about the service, what the service does well and improvements they plan to make. We looked at the previous inspection report and notifications which had been submitted to us. A notification is information about important events which the provider is required to tell us about by law. We took this into account when we inspected the service and made the judgements in this report.

The inspection team consisted of two inspectors, an assistant inspector and an expert by experience. An expert by experience is a person who has personal experience of using this type of service.

The inspection was informed by feedback from questionnaires completed by a number of people using the service, relatives, staff and health care professionals. This confirmed people were supported to live a fulfilled life and were supported to live the life they wanted. We contacted 11 commissioners and health care professionals for their feedback about the organisation.

During the inspection we spoke to 10 people receiving support from the organisation. We spoke with two relatives. We spoke with ten staff which included, the two registered managers, a senior operations manager, three managers of services and three care staff. We looked at records that related to how the service was managed including five staff recruitment files, staff training and quality assurance. We looked at six care and support records including, risk assessments, support plans, medicine records, health records and maintenance records.

## Is the service safe?

### Our findings

There was an innovative approach to maintaining people's safety. People had been supported to attend groups within the local community to develop relationships with the Police Community Support Officers (PCSO's) as well as being informed how to stay safe when out in the local community. The senior managers had worked with external professionals to inform and educate people about hate crime. The management team worked creatively to engage people and increase their knowledge and understanding about keeping safe. People were encouraged to raise their own concerns with the local authority if they had been involved in an incident of concern. People had been provided with the confidence and knowledge to raise any concerns and felt safe doing so.

There were organisational safeguarding policies and procedures in place for staff to follow. Each service had access to the local authorities' protocol and procedure for raising concerns. Staff had been trained and understood the potential signs of abuse and the action that was required. Safeguarding and keeping safe was discussed at each team meeting and tenants meeting.

Staff had supported people to build on and further develop links with the community including the police force. They supported people to run a stall with a local crime prevention unit with PCSO's to raise awareness about different forms of abuse and the action people should take. Staff from the local authority had attended some of the services to talk about their role and how to report abuse. This had promoted people's confidence, knowledge and understanding about abuse and the action they should take which had led to people feeling confident to raise concerns.

People were enabled to take positive risks and have control over their lives. People's wishes were respected and staff supported people in the safest way possible whilst respecting the persons' choice. Potential risks posed to people in their everyday life had been assessed and mitigated. People were involved in the assessment and review of any risks posed to them and the environment they lived in. The organisation had a team of maintenance people that were available for any urgent or non-urgent repairs to the environment. People's specialist equipment had been serviced and maintained to promote people's safety. Regular safety checks were completed within each service to ensure the safety of people and others.

There was a business continuity plan in place which had been localised for each individual premises. There was a small fire at one of the services which meant that the business continuity plan was put into use to ensure that people remained safe and continued to receive a service. The people had to move to other homes whilst the fire was managed and any damage was repaired. One person went to stay at another premises and decided that they preferred that premises to the one that they were at already, so the managers facilitated a move to the new service for that person. The person told us that they were happy at the new service.

At our last inspection we made a recommendation that an audit of recruitment files was completed to ensure they contained full employment histories. At this inspection we found that a comprehensive audit of staff files had been completed. The importance of gaining information from potential new members of staff

had been embedded throughout the local management group. Staff had been recruited safely and relevant checks had been made before staff started to work with people. These included employment references and identification checks. Checks had been made against the Disclosure and Barring Service (DBS). This highlighted any issues there may be about staff having criminal convictions or if they were barred from working with people.

There were sufficient numbers of staff employed within each person's team to meet their needs. A proactive approach was taken to making sure people were supported by staff they had helped to choose. People had been involved in the recruitment of their staff team through the interview process or meeting with potential new staff on an informal basis. People had been involved in developing the advert for their staff team including specific requests such as a female. This had enabled people to take the lead and be in control over who supported them.

People's support plans contained the specific support and guidance they required with their medicines. For example, one person had recorded where they wanted to sit prior to taking their medicines and the specific drink they wanted. Medicines were managed safely and regular audits took place within each service by a member of the management team. Any medication errors were documented and analysed by the senior management team on a quarterly basis. Action was taken when any patterns or trends had been identified. The senior management team met to discuss and review each medicine error and took appropriate action and improvements were made. For example, suspending the member of staff from administering medicines and further competency checks. One person had chosen not to take their prescribed medicines and understood the consequences of this. Guidelines were in place for staff to follow as this person had the capacity to make this decision.

People took control in managing risks relating to infection and hygiene. People were supported to understand good food hygiene within the kitchen and when preparing meals. Staff received training regarding food safety and used this knowledge when supporting people to prepare their meals. People received support from staff to identify and manage risks relating to infection and hygiene such as, hand hygiene.

All accidents and incidents were recorded and the cause reviewed to prevent future reoccurrence. Incidents of behaviour that challenged were analysed by the organisation's positive behaviour support team and where needed a debrief was given to the staff members involved. This allowed staff to be supported whilst identifying any improvements which could be made.

## Is the service effective?

### Our findings

People's needs were assessed prior to receiving support from the organisation. A transition plan was created with people and their relatives to enable a smooth transition between services. People were supported with visits to the potential service to meet others and promote their choice of who they live with. Transition plans were individualised to meet that person's needs and included things such as, lunch and dinner visits and overnight stays.

Support plans contained clear guidance for staff on how to support people with their needs in the way they wanted. Support plans and risk assessments described fully how to support people with their behaviour that challenged. Positive behaviour support plans were used and staff received training in order to support people effectively. The organisation had its own positive behaviour support team that worked alongside staff to support people in the least restrictive way possible. Some people required additional support to manage safety when their behaviour challenged; records showed these interventions were used as a last resort.

People's individual protected characteristics under the Equality Act 2010 were considered during needs assessments and within people's support plans. People were supported to complete a gender preference form for their personal care. Staff respected people's rights and choices. For example, one person had made the decision not to follow advice from health care professionals. Staff respected this person's choice and supported them in the safest way possible whilst ensuring their rights.

Staff working within the services received regular support, supervision and an annual appraisal with their line managers. Staff told us they felt supported by their local manager and that the senior management team were approachable and available. Managers at all levels were visible throughout the services. The organisation supported the rights of staff and made adjustments to enable staff to stay well at work. One person's rota had been changed to enable them to have a longer period of rest time. Another member of staff was supported to take regular breaks to manage their health condition.

People received effective care and support from staff who had been given the knowledge, confidence and experience to carry out their role. Staff completed specific training based around people's needs. All staff completed an induction which involved completing the organisations mandatory training. Staff then completed a service specific induction depending on where they were going to work. Staff were supported to gain qualifications or develop their skills in areas of interest.

People had enough to eat and drink, were supported with their dietary needs and were offered choice. People were supported to menu plan, shop and cook. Staff worked alongside health care professionals when required to ensure people received a coordinated and joined up approach to their care.

People were supported to live healthily and access the healthcare they needed. Staff followed guidelines from health care professionals to support people with specific health conditions. People were supported to access a range of health care services to ensure they remained as healthy as possible. Records confirmed

this and included hospital passports. These were documents to help provide important information when a person is admitted to hospital. For example, how the person wishes to communicate and any allergies they have.

The Mental Capacity Act 2005 (MCA 2005) 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 people lack mental capacity to make particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People were supported to have maximum choice and control of their lives. MCA assessments had been completed for less complex decisions such as, agreeing to personal care and consent to the administration of their medicines. Records showed that decisions had been made in the person's best interests with the involvement of relevant people.

## Is the service caring?

### Our findings

People and their relatives told us the staff were friendly, kind and caring. One person said, "They are very good. They make me happy." A relative said about the service their loved one received, "It is such high quality and the staff are dedicated. The staff are all very friendly and show clear dedication in their role." Another relative said, "The staff are lovely people, they get on so well with [loved one]. They know her so well and know her needs. I can't ask for anything more."

Staff respected people's privacy and dignity at all times. We observed staff knocking on people's doors and waiting for a reply before entering. Staff received training and followed the organisations policy and procedure.

Staff demonstrated in depth knowledge about people's needs and personal histories. Observation showed staff using appropriate touch to reassure and alleviate people's anxieties. Many staff had worked with people for a number of years. People were observed to be relaxed in staff's presence; laughing, joking and smiling. People were given the emotional support they needed at the appropriate time. Support plans contained detailed guidance for staff to follow regarding emotional support. Staff were able to respond quickly to people using their preferred method of communication. We observed staff responding to one person's specific word prompts when they wanted us to leave their space.

People were involved in the development of their support plans and risk assessments. Support plans were meaningful and in a format that people had chosen. For example, pictorial based and easy read formats. People had been supported by family members, staff and advocates to express their views and have control over their care and support. An advocate is a person that is independent from the organisation and who support, enable and empower people to make decisions. People with learning disabilities sometimes need more support to get their views and wishes heard and advocates can assist people to gain control over their lives and make decisions. People were encouraged to gain independent living skills such as, cooking, cleaning and managing finances. People told us and we observed staff encouraging and guiding people through general tasks such as, making their own lunch and cleaning their bedroom.

People were supported to express their views and be involved in the development of where they lived. People's choice over who provided their care was promoted and people were able to choose another provider if they wished to. Regular tenant meetings were held to discuss the service and enable people to make suggestions or raise any concerns. We saw that topics that had been discussed included, the weekly menu, food shopping and cleaning of the communal areas. People also had regular meetings with their key worker; enabling them to reflect on the previous month and plan for the next month.

People were supported to maintain contact with people that mattered to them. The organisation took part in a project promoting relationships and sex education for people with learning disabilities. The organisation funded their quality analyst to complete a doctorate by researching, forming and maintaining relationships for people with a learning disability. The 'supported loving' initiative included a social media campaign and a network group which meets regularly and shares stories and support in finding and

maintaining relationships.

## Is the service responsive?

### Our findings

People received an extremely responsive service that met their wants and needs. Staff went over and above their role to support people to live a happy and fulfilled life. One person was a fan of Chas and Dave and attended a concert for their birthday with the support from staff. A member of their staff team contacted the group beforehand to inform them that it was the person's birthday and that they were an avid fan. During the concert the band played a song and dedicated it to the person. The person spoke with immense delight when he told us the story about this. They said, "This was a dream."

Staff worked hard to enhance people's well-being and fulfil their dreams and aspirations. One person whose ambition was to feed an elephant was supported to achieve this through staff support to overcome psychological barriers. The staff team used a virtual reality system to enable the person to walk amongst elephants in their natural environment, within the comfort of the person's own lounge. The person told their staff they loved this and asked if they could see and feed real elephants. The person was supported by their staff to research places where you were able to feed elephants. The person was then supported to a zoo where they fed the elephants. They spoke proudly when showing us the photographs of the day. They said, "It was great, I loved it, I love elephants."

People were supported to gain independence and move on into independent living. A transition service was used to enable people to develop the skills they required to live as independently as possible. One person with profound and multiple disabilities was supported to develop skills to enable them to body wash independently. Equipment was sourced and its use was imbedded into every day practice to enable the person to use this independently. This person had not been able to previously wash themselves however, due to the motivation of the person and staff to they were now able to wash independently. The person's relative told us that since being supported by the organisation the person's quality of life had improved and they had learnt new skills and increased their speech and understanding.

Creative ways were used to support people to communicate. People that had a profound disability had been supported to develop a multi-sensory bag book. This included objects of touch and smell whilst telling a story. People had been involved in the development and creating the book. The management team had liaised with the local library to facilitate this with people. This enabled the promotion of communication between people and those that mattered to them. This is a multi-sensory book for people with severe or profound and multiple learning disabilities to enable story telling with voice and emotion. People were seen smiling and laughing whilst creating their book.

One person with complex needs followed a strict set daily routine which would cause them distress if it was not followed. This involved visiting a local café daily. Staff realised that the cafe may be closed over the Christmas period which the person would not understand. A few weeks before Christmas the staff liaised with the local cafes to find out where would be open during the Christmas period to enable the person to continue their day without causing distress and upset. They planned alternative cafes and recorded this so there was a plan for staff to follow.

People were supported to have an enhanced sense of well-being and self-worth. People were supported to attend adult education services and completed courses such as information technology, animal healthcare, English and maths. People were also supported with employment opportunities. The provider continued to manage many social enterprise services which enabled people to learn and develop skills that were required to find employment. People were given support to gain practical knowledge in areas such as horticulture, finances and delivering confectionary boxes. These enabled people to learn and develop lifestyle skills, build confidence and avoid social isolation. One person had expressed a desire to learn to drive. Staff had supported them to make this happen and helped them to study to take their theory test as a first step towards this wish. People were given as many opportunities as possible to learn and maintain skills.

People were supported to live as full a life as possible and be part of their local community. Two people had requested to lose weight with the support from staff. The times of their support had been adjusted so they could attend a local slimming club weekly and plan their menu using the healthy eating guide from the club. One person spoke proudly about their achievement of losing weight with their friend. Other people were supported to access the local gym, leisure centre, day centres and theatres. One person had been supported to save money for and book a five-course meal on board the sister train of the Orient Express, which had always been a dream of theirs. The person said they felt their staff were "Brilliant." A group of people had been supported by staff to maintain a 'walk and talk group'. This had initially been set up by the occupational therapy team however, the funding was cut and the group ended. People told their staff that they wanted this group to continue as it had helped their mobility as well as being a social gathering. Staff liaised with people and the group continued to meet on a weekly basis. This enabled people to continue with their exercise whilst maintaining their social life with friends. People could engage in meaningful activities; at the same time as increasing their confidence and limiting social isolation.

People's support plans were extremely detailed providing comprehensive information and guidance on the person's needs and preferences. The support plans were under continuous review to ensure people's needs were met. People told us they had been fully consulted and listened to when developing and reviewing their support plan. Staff were knowledgeable about how people liked to be supported and used this information to meet their needs. Staff supported people to hold person centred reviews, key worker meetings and open communication to find out what was important to the person.

People had set goals they wanted to achieve and staff supported people to achieve these. For example, one person's goal was to increase their independence with personal care; staff wrote a task analysis plan to break down each step that required completing. Staff followed each step with the person to promote consistency and continuity. This enabled people to move onto independent living and learn skills that they previously did not have. Another person's goal was to see Elvis, however they understood that this was not possible. Staff sourced an Elvis impersonator concert and supported the person to attend, the person was smiling and singing when they told us about the concert.

The organisation had a complaints policy and procedure in place, this was in a user-friendly format and available to people within their home. Complaints were seen as a positive way to enable quality improvement. Comprehensive investigations took place when complaints had been raised and action was taken when required. People living within each service had the opportunity to raise any concerns with their key worker and at regular tenant/house meetings. Individual services had received a number of compliments from families, friends and health care professionals.

People were empowered to prepare a plan for the care they wanted at the end of their life, if they wished to. People were offered the opportunity to discuss their wishes and their choice whether to or not was respected. No one was receiving care at the end of their life at the time of our inspection. Some people had

chosen to create an end of life plan that was to be followed by staff. The plan included what was important to the person when dying, how they wanted to be treated and any arrangements following their death. Some plans contained specific guidance and detail which was to be followed such as what the person wanted to wear following their death and specific music they want played during the funeral.

The organisation had a comprehensive communication and accessibility policy and procedure which supported the Accessible Information Standard (AIS). AIS was introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand. It is now the law for the NHS and adult social care services to comply with AIS. The organisation had an assisted technology and innovation team who carried out assessments at services to determine whether there was any additional technology that could be used to support people in their daily lives such as, for communicating. Some people used an app on an electronic tablet to assist with communications and enabled them to express their views. The organisation supported people with varying communication needs ranging from people with limited or no verbal speech and other people who used an alternative form of communication. There was a flexible approach to communication and each person's communication plan or passport was individualised; informing staff how the person would communicate their needs. The organisation employed a communication lead practitioner whose role involved working with people and their staff teams to develop effective methods of communication. People were supported to access assistive technology to increase their independence and communication.

## Is the service well-led?

### Our findings

The organisation and senior management team promoted an open, inclusive and empowered culture. The organisation was committed to providing people with a creative service that placed them at the centre. Staff said they felt proud to work for the organisation and said that people were offered a person-centred service. There were plans for future improvements to go alongside the continuous improvement.

People's views were listened to, acted on and were at the heart of the organisation's vision and values. The organisation had recently started the process to merger with another charity. A project had been carried out to launch a new vision and set of values for the new organisation, once the merger had taken place. People's views were sought and acted on in a creative meaningful way. This was through the one to one meetings with their staff, through tenant meetings and surveys. People using the service and staff were consulted and asked for their feedback about what words and values people felt reflected the organisation. People fed back that some or the wording used previously was difficult to understand. As a result, people's feedback and suggestions had been presented before the board; it was agreed to use a vision and set of values that was meaningful to people and easily accessible. The values included, 'a world where everyone matters and everyone cares.'

The organisation used innovative ways of involving people to promote and increase the quality of the service that was provided to people. A team of people that received support from the organisation had been given the support and training to become 'experts by experience'. Their role involved playing an integral part of the quality assurance team, speaking with people who use the service and gaining their feedback about the service they received. The views of people using the service were at the core of improvement. This gave people the opportunity to be fully involved in the development of their care and support. People felt confident to speak with their peers and make further suggestions for improvements.

There were high levels of satisfaction amongst all staff, who were proud to work for the organisation and spoke highly of the support they received from the management team. Comments included, "I'm proud of working, getting a thank you at the end of the day either from people you've been working with or management", "I'm proud I've been there such a long time. I've seen some wonderful changes in people" and "I'm really proud of my award and for getting [name] back to good health. It's nice when visitors come and say how good she is looking now."

Staff were highly motivated to support people to live the life they wanted. The senior management team inspired the local managers, who then inspired staff working in services to work to high standards so that the people they supported lived a happy and fulfilled life; the life they wanted. Staff were communicated with in a monthly newsletter which covered key themes and topics such as safeguarding or changes to the organisation. A managers briefing was also sent out monthly with key themes for managers to feedback to staff within the services. Staff meetings were arranged and rotas ensured that staff could attend these meetings regularly which provided an opportunity for staff to have input and understand their roles and feel motivated. Staff said they felt included and valued.

The organisation and senior management team had signed up to various memberships to promote current and best practice. These involved, British Institute for Learning Disabilities (BILD), investors in people, challenging behaviour charter, challenging behaviour standards, driving up quality code, social care commitment, mental health providers forum and STOMP (stopping over medication of people with a learning disability). Incidents of challenging behaviour had reduced for people. The registered managers ensured they were keeping updated to ensure they were following recent guidance in relevant areas. For example, British Assistive Technology Association and the Challenging Behaviour Foundation Professionals Network. The local managers attended partnership boards or forums, for example Learning Disability forums run by the local authority. Managers had signed up to and received CQC's newsletters to keep updated and met with the local authority on a regular basis.

There was a governance structure in place which supported with ensuring that audits were carried out and actioned. People were involved in auditing the place they lived; identifying any potential hazards or areas for improvement. Themes and trends from incidents, accidents and complaints were identified and changes made as a result and ensuring that the organisational policies were up to date and included best practice guidance. For example, as part of the merges process an external organisation had been commissioned to carry out a review of safeguarding within both organisations to identify where there were shortfalls and how to ensure that the joint policy reflects good practice. A steering group that included people had been put in place to ensure that the recommendations from the report were carried out and learning had been shared through communications with staff. The new policy was in development and both organisations will work within their current policies until the new policy is approved through the governance structure.

There was a system for carrying out audits at each of the services which had been part of the continuous improvement since the last inspection. These were now carried out by the managers on an electronic tablet which generated any actions at the same time and meant that the services received them immediately instead of having to wait for a report to be produced. This also allowed for electronic monitoring of action plans to check that services were making improvements and the actions were also followed up at the next audit.

People were empowered to voice their opinions about the service they received. Annual surveys were carried out to gather people and stakeholder views. The surveys had been adapted to meet people's specific communication needs. The results showed a high level of satisfaction from people regarding the service they received. At a local level, tenants' meetings were held within each service to discuss topics that were important to people and make plans such as activities and preparing for annual festivities. A family and carer forum was held every six months to gather the views of people's family and friends on how the service was doing. It was through a family and carer forum that the managers were able to receive feedback regarding how they had managed some issues with one of the services and that people were now happier.

The organisation was committed to ensuring they had a skilled workforce. Staff were supported to achieve national qualifications in social care that would support future career opportunities. Staff in management positions completed leadership and management qualifications such as a Qualifications and Credit Framework (QCF) level 5. This is an accredited qualification for staff working in a management role. The senior management team had attended an inclusive technology conference to find out about various forms of assistive technology and how these can be used to aid people's independence. For example, eye gazing technology to enable people with profound and multiple disabilities to make decisions about their lives and be fully involved. Following the conference, assessments were completed with people to see whether the technology would benefit them.

The senior management team had successfully integrated and maintained relationships with the local

community. They had worked in partnership with a local university and Medway Police to produce a study about hate crime when out in the community. As a result of this study two hubs and safe places were identified; these gave people somewhere safe to go if they were a victim of hate crime when out in the community. The organisation had developed a training package for police officers and local schools to raise awareness and educate students about hate crime. There were positive relationships between each service and professionals such as GP's and the speech and language therapy teams (SALT). One service had liaised with the local GP practice and it was agreed that people would receive a home visit, this was due to the complexity of their needs as going to a doctor's surgery would cause distress. This enabled people to receive the medical attention they required without the anxiety or distress of visiting the GP surgery.

The senior management team had identified that notifications sent to the CQC were not consistent and of the same standard to include all the required information. They implemented a quality checking process and from that a flow chart was written for how to complete notifications so that the correct information was completed each time. The flow chart was shared with all service managers and ongoing monitoring was in place to ensure that managers were following it. Improvements had been seen in the quality of the notifications being written.