

Borough of Poole

Borough of Poole - Supported Living Service

Inspection report

Dorset House Bungalow, Coles Avenue
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Tel: 01202676250

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27 April 2017

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Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Borough of Poole Supported Living Services is a personal care supported living service for 34 people with learning disabilities living in their own properties in Poole.

At the last inspection in August 2016, overall the service was rated Good but Well-led was rated requires improvement.

This was an announced focused inspection on 27 April 2017 to follow up on the actions taken to address the breach of regulation in relation to the governance of the service. This was because at the last inspection the previous registered manager had not been at work for a period of time and governance procedures had not been followed. Where concerns had been raised about the quality of service these had not always been acted upon. This meant the quality of service people received could not be assured.

At this inspection there were significant improvements in the governance of the service. Staff spoke highly of the new registered manager and the changes that had been implemented. All actions included in the registered manager and provider's action plan had been met. The service was now well-led and there was an open, inclusive and person centred culture.

At this inspection we changed the rating for the key question 'Is the service well-led?' from Requires Improvement to Good. The overall rating for the service remained Good.

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 well-led?

Good ●

The management of the service had improved and it was now Good.

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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 focused follow up inspection took place on 27 April 2017 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be in.

The inspection was conducted by one inspector. We spoke with the registered manager and two senior care officers. We reviewed the quality assurance and monitoring systems, staff meeting minutes, a sample of staff supervision records, and the accident and incident records and monitoring systems.

Before our inspection, we reviewed all the information we held about the service. This included the information about incidents the registered manager notified us of.

Is the service well-led?

Our findings

At our last inspection in August 2016 the previous registered manager had not been at work for a period of time and governance procedures had not been followed. Where concerns had been raised about the quality of service these had not always been acted upon. This meant the quality of service people received could not be assured.

The new registered manager started work at the service in September 2016. They and the provider submitted an action plan in September 2016 that included they would be compliant with the regulation by December 2016.

At this inspection action had been taken to address the shortfalls identified at the last inspection.

The service was now well-led and there was an open and person centred culture. People had a monthly review with their support workers and the registered manager reviewed these to make sure any actions identified were followed up. The registered manager visited people in their shared supported living accommodation every day.

The senior care officers co-ordinated each shift and there were handovers between each shift leader to make sure important information was shared with staff. Senior care officers spoke highly of the new registered manager and the improved communication between all staff. They told us they felt valued, listened to and had confidence in the registered manager. Staff said the registered manager was approachable, supportive and was a good mentor.

There were weekly senior team meetings with a set agenda which included beliefs, values and attitudes, medication audits, daily checks, safeguarding, complaints, policies, improvement plan, people, budget, senior rota, quality monitoring and staff memos. Any accidents or incidents were now entered onto an electronic monitoring system and were reviewed at the weekly senior meetings. Any learning was shared with staff and any other appropriate agency. For example, one person had self-harmed and injured themselves. The learning from the incident and the person's updated care plans were shared between the provider's staff, the person's day centre and the housing association staff that also supported the person.

There were monthly memos that all staff received either by post or by email. These memos included any positive feedback received, guidance about any policies and procedures and any learning from complaints, incidents or safeguarding. Where needed memos with additional information were sent to staff.

People received posters and information from the registered manager in easy read formats that were supported by photographs or pictures. For example, posters had been sent to people about the upcoming general election and when key staff were on holiday.

The registered manager and provider had produced an improvement plan and there were regular meetings with another of the provider's registered managers and service managers to look at how they could share

good practice and develop their services.

There were plans to consult and complete surveys with people, people's representatives, staff and professionals involved with the service over the coming months. These surveys were going to be completed by the provider's quality team. The registered manger told us the quality team would analyse all of the results so the registered manager and the staff team could address any shortfalls or areas for improvement in an action plan.

There were improved quality monitoring systems in place with the registered manager auditing health and safety in people's homes, support workers knowledge, people's finances, medication and people's care and support records. The provider's service manager also completed 'check the checker' audits to make sure the systems in place were effective. Any shortfalls identified in the registered manager's audits resulted in actions being identified that were reviewed during the next audit.

Complaints were fully investigated and responded to and this was an improvement. Any actions and learning was implemented and shared with the staff team.

People had weekly 'speaking up' sessions planned that would be facilitated by Poole learning disability forum. This was to support people with speaking up and giving their views and opinions. The plan was that following these sessions, the registered manager would hold monthly consultation forums with people so they could feed back their views of the service.

The provider's policies and procedures had been implemented by the registered manager and this meant staff had clear guidance to follow. For example, staff sickness was managed in line with the provider's policy and this had led to a significant reduction in staff short term absences,

There had been a significant reduction in the use of agency staff to support people in their own homes from 300 hours per week to 30 hours per week. This meant people were supported by staff who knew them well. Staff told us this was particularly important for those people they supported who do not communicate verbally.

The service worked in partnership with the local community learning disability team and the housing association. The relationship with the housing association had improved since the last inspection and there were now regular meetings. This meant there were improved outcomes for people who used the service. For example, people's property repairs were now addressed quickly.

The service's CQC rating was displayed in the office and on the provider's website.