

Creative Support Limited

Creative Support - Morecambe Service (Learning Disability)

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

About The service

Creative Support (Morecambe Service Learning Disability) supports people who have a learning disability or mental health needs in their own home. Support is provided through domiciliary care home visits and through the provision of supported living services. At the time of the inspection visit the service provided support to 37 people in supported living settings and 25 people from the domiciliary service.

The service had been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People were protected from the risk of abuse and kept safe by staff who were trained to protect them. The registered manager recorded and audited any incidents and accidents and learnt from them. Staff continued to be recruited safely and sufficient numbers of staff supported people in the community and supported houses Staff confirmed this when spoken with. Medicines were managed safely by trained staff. Infection control systems and audits continued to be in place to support staff when delivering personal care.

The registered manager ensured staff received an effective induction and training programme that was continually updated. People's needs were assessed, and care and support had been planned proactively and in partnership with them. People were happy with the support they received with meal preparation. One person who lived one of the supported houses said, "I enjoy cooking and shopping for food it is a hobby." People received support with their healthcare needs promptly. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People were positive about the service and said staff were kind, considerate and caring. People were treated with dignity and respect and were fully involved in their care planning. People's right to privacy was upheld. They told us staff were committed to support and guide them to live their lives to the full. The registered manager provided people with information about local advocacy services, to ensure they could access support to express their views if they needed to.

Activities in supported houses were varied, and people told us there were trips and holidays planned regularly. People's communication needs had been assessed and where support was required these had been met. People knew how they could raise concerns about the service and a complaints procedure was in place.

The management team were clear about their roles and provided care which resulted in good outcomes for people who lived in the community and supported houses. They worked in partnership with a variety of agencies to ensure people's health and social needs were met. The registered manager used a variety of methods to assess and monitor the quality of the service on a regular basis. This was to ensure Creative Support continued to evolve and improve.

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

Rating at the last inspection

The last rating for this service was good (published 12 June 2017).

Why we inspected

This was a planned inspection based on the previous rating

Follow up: The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the service.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led

Details are in our well-led findings below.

Creative Support - Morecambe Service (Learning Disability)

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats. Also, this service provides care and support to people living in nine supported living settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. The Care Quality Commission (CQC) does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave a short period notice of the inspection because some of the people using it could not consent to a

home visit from an inspector. This meant that we had to arrange for a 'best interests' decision about this.

What we did before the inspection

We reviewed information we had received about the service since the last inspection, including information from the provider about important events that had taken place at the service, which they are required to send us. We also sought feedback from the local authority.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with 10 people who used the service, the registered manager and four relatives. We also spoke with the area manager, and three senior staff. In addition, we spoke with 10 members of the care support staff team. We also visited one supported home and observed care practices and how staff interacted with people in their care. This helped us understand the experience of people supported by the service.

We looked at care records of two people. We also looked at records relating to the management of the service, recruitment of two staff members and medicines records of two people. We also reviewed the services staffing levels for the domiciliary service and supported living houses.

After the inspection

We continued to communicate with the provider to corroborate our findings and further information was sent by the provider in response to the feedback provided during the inspection visit.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were cared for safely. Everybody we spoke with confirmed this. One person said, "Yes I don't feel unsafe. I trust them."
- Staff were aware of the signs of abuse and how to report safeguarding concerns. The registered manager was aware of their duty to raise or report any safeguarding incidents to ensure people were kept safe and protected.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The management team managed risk. They documented assessments information for staff about people's risks and how best to support the person to reduce that risk. They kept these under review and updated risk assessments when required to ensure staff had access to information and support people safely.
- The registered manager reviewed incidents to ensure risks were reassessed to prevent reoccurrence where possible and update any actions that were identified. Lessons learned were shared with staff to improve the service and reduce the risk of similar incidents.

Staffing and recruitment

- Staff continued to be recruited safely. The management team continued to ensure checks had been carried out prior to staff commencing employment. A recently employed member of staff said, "It was a really good procedure and the induction was fantastic. I learnt a lot."
- Suitable staffing arrangements were in place to meet the assessed needs of people in a person-centred and timely way. Staff spoken with confirmed this. People told us staff were reliable and didn't let them down. A person who received support in their own home said, "They help me a lot and are on time." Supported houses were staffed to ensure people were safe. Staff spoken with confirmed they were happy with staffing levels in the supported houses and the domiciliary service.

Using medicines safely

- Medicines continued to be managed safely, and people received their medicines when they should. We checked documentation in one of the supported houses and correct procedures were followed.
- Staff who administered medicines had completed relevant training to administer medicines safely and staff confirmed this.

Preventing and controlling infection

- The registered manager continued to have safe and effective infection control procedures in all supported houses. Personal protective equipment such as aprons and gloves were available if required when visiting

people's homes.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The management team assessed people's needs and preferences in relation to their care and developed a care plan to ensure their needs could be met. Records were consistent, and staff provided support that had been agreed during the assessment process. One person said, "We go through everything including times and what we need, they are very good."
- The registered manager continued referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported the service to ensure people received effective, safe and appropriate care which met their needs and protected their rights.
- Care plans continued to be regularly reviewed and updated when required. This meant staff had up to date information and ensured people received the right support.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and carried out their roles effectively. Staff told us they regularly updated training and were supported to develop professional skills through qualifications. At the time of the visit staff were attending a training session at the office. Staff told us access to training events was good and they were supported by the registered manager to attend events and further their knowledge and skills.
- Staff told us they felt supported by the registered manager and received regular supervision and appraisal of their duties.

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

- Staff ensured people's nutritional needs were managed to ensure they received a balanced diet and sufficient fluids to keep them hydrated. Care plans confirmed people's dietary needs had been assessed.
- People were provided with meals and drinks they enjoyed. In supported houses they were encouraged to prepare meals and make their own choices to promote independence. One person said, "I enjoy cooking and shopping for food it is a hobby."
- Staff had completed nutritional assessments to identify people's needs and any risks they may have when eating. Staff sought professional guidance where people were at risk. For example, if a person had difficulties with swallowing they contacted health professionals and received guidance to ensure people's nutritional needs were met.

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

- People were supported to maintain good health and had access to healthcare services when required. We confirmed this by documentation we looked at in care records.

- People were supported by staff to attend healthcare appointments when required and they confirmed this when spoken with.

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

Supported houses were adapted to be safe, accessible and suitable for the needs of people who lived there. The registered manager ensured the premises were maintained. The registered manager consulted people, for example, about how each home was decorated. We saw people had been supported to personalise their bedrooms to their choices.

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

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

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

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

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The staff were knowledgeable about their responsibilities under the MCA and people's rights were protected. The management team had made DoLS applications when required.
- Consent to care and treatment in the care records had been signed by people with the appropriate legal authority to do so. Care records contained consent to care documentation that was signed by the person receiving care or their representative.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- People continued to be treated with patience, respect and kindness, by staff who promoted equality and valued diversity. People told us they had the same small group of carers who knew and understood their needs. A relative said, "The care that we get is absolutely first class."
- Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs. Care records seen had documented people's preferences and information about their backgrounds.
- We received positive comments from people and relatives about how well people were cared for in supported houses and domiciliary service. Comments included, "They are so kind and respectful." People told us they had formed good relationships with their staff.

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

- The registered manager and staff team supported people with decision making. Care records contained evidence people who received support, or their representative had been involved with developing their care plans.
- There was information available about access to advocacy services should people require their guidance and support. An advocate is an independent person, who will support people in making decisions, to ensure these are made in their best interests.

Respecting and promoting people's privacy, dignity and independence

- Staff promoted people's independence, and this was the aim of Creative Support. Staff supported people to make choices, to do what they could for themselves and be independent as possible. One person said, "I have been working for [number of years] I love it. I go on my own and have made lots of friends."
- Encouraging people to develop life skills was an important part of the support work in the supported houses. A staff member said, "It is the main part of the role to encourage people to live the life they want to and undertake challenges, we are here to support them achieve their aims."

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People continued to receive care and support which was personalised to them. Care records of people in supported houses contained information about their preferences, needs and choices. Staff were familiar with people's likes and preferences including activities, and signs to indicate distress or anxiety. This created a person-centred environment for people to express their views.
- People told us staff gave them choices and they were able to make every day decisions about their care and how they wished to spend their time.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were identified, and care plans contained instructions of how to ensure effective communication between staff. Staff recognised the importance of giving people time to respond and specific training was on offer. A staff member said, "Yes any training to support people with communication is useful and supported by the manager."
- The service easy to read information booklets on health matters and person-centred care records was available. Staff used pictorial communication boards for people to help them know daily routines.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were leading fulfilling and active lives and were independent with staff support when required. People were actively involved in employment, education and activities in the local community. They were able to be flexible and chose what they wanted to do daily. People followed their own hobbies, choices and interests. They regularly chose where to go shopping and to venues they visited. Some people in supported houses liked to go on holidays with staff support. Comments included, "I loved [city visited] it was fantastic to see the football stadium." Also, "I go to work and love going, I really enjoy it."
- People were supported to maintain and develop relationships with friends and family. The service had arranged for healthy relationship and sexual well-being training courses for people who use the service and for staff.

Improving care quality in response to complaints or concerns

- Complaints were taken seriously, and a system was in place. People knew how to make complaints. The

registered manager told us they learnt from complaints as a positive experience to improve the service. No formal complaints had been received since the previous inspection.

- People told us they had no reason to complain but had confidence any issues would be dealt appropriately. One person said, "There's not been any cause for complaint."

End of life care and support

- People's end of life wishes had been recorded so staff were aware of these. At the time of the inspection the service was not supporting anyone with end of life care.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The management team planned and delivered effective, safe and appropriate person-centred care. Current and relevant legislation along with best practice guidelines had been followed.
- The service continued to have systems to make sure people received care which met their needs and reflected their preferences.
- Staff meetings and regular 'house meetings' in supported living settings were held to discuss issues and matters relating to people's care and support. Staff told us they found these useful and the meetings offered a chance to discuss any issues or improvements they felt may be beneficial for people.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The management team encouraged candour through openness. People told us good communication and relationships had been developed between staff, registered manager, management team, and people who used the service.
- The registered manager continued to regularly assess and monitor the service through audits, and meetings with people. This demonstrated improvements were identified and implemented to develop and improve the service through continuous monitoring.

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

- The registered manager was experienced and had a good management team who were knowledgeable about the needs of the people they supported. A staff member said, "A very good manager who is so supportive." And, "We have a good senior management team in all the houses, it's a very good service and well led."
- Discussion with staff confirmed they were clear about their role and between them provided a consistent and organised service.
- The registered manager understood their legal obligations, including conditions of the Care Quality Commission (CQC) registration and those of other organisations. They had submitted statutory notifications to CQC about people using the service, in line with current regulations. A statutory notification is information about important events which the service is required to send us by law.

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

characteristics

- The registered manager created an open culture and encouraged people to provide their views about how the service was run.
- Relatives and relevant others were regularly involved in consultation about the provision of the service and its quality. A relative spoken with confirmed this.

Working in partnership with others

- The management team continued to work in partnership with other organisations to ensure sure they followed current practice, providing a quality service and the people in their care were safe. These included healthcare professionals such as GPs and social workers. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care.
- People were encouraged to build links with the local community and people we spoke with felt this had enhanced their daily lives. One person said, "Always out and about and some of us work in the community."