

Supported Independent Living Limited Bluebell Court

Inspection Report

39 Kipling Drive Blackpool Lancashire FY3 9TH Tel: 01253 691343 Website: www.supportedindependentliving.co.uk

Date of inspection visit: 29/04/2014 Date of publication: 23/07/2014

Contents

Summary of this inspection	Page
Overall summary	2
The five questions we ask about services and what we found What people who use the service and those that matter to them say	3 5
Background to this inspection	6
Findings by main service	7

Overall summary

Bluebell Court provides a supported living service for up to twelve people with a mental health need. Supported living is a way of providing housing and support to help people to lead independent lives. The building is purpose built and people live on-site in spacious self-contained flats. Care and support is provided twenty four hours a day by staff who work from an office on the premises.

There is a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service and shares the legal responsibility for meeting the requirements of the law with the provider.

During our visit we saw staff had a good relationship with people who lived at Bluebell Court. People were relaxed and comfortable. People spoke positively about the service and how staff had made them feel supported to make positive changes in their lives.

Suitable arrangements were in place to protect people from the risk of abuse. People told us they felt safe. The service had safeguards in place for people who may have been unable to make decisions about their care. People were involved in making decisions about all areas of their support. We saw their individual files included appropriate and thorough risk assessments and support records. We noted the service had documentation in place to manage 'positive risk taking.' This meant that people's freedom was not restricted. Support plans were regularly reviewed to ensure people's changing needs were met.

We looked at how the service was being staffed and reviewed staff training and supervision. We saw there were sufficient staff on each shift with a range of skills and experience. Staff told us they felt supported, had regular meetings with their manager, and their training was kept up to date.

We found there were systems and processes in place to monitor the quality of the service being provided. Staff told us they felt this was underpinned by an open reporting culture and strong leadership.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

People spoken with confirmed they felt safe at Bluebell Court. Staff spoken with had an understanding of the procedures in place to safeguard vulnerable people from abuse and had received training on this subject. This meant staff knew how to recognise and respond if they witnessed or suspected any abusive practice.

We found individual risks had been assessed and identified as part of the support planning process. Control measures had been put in place to manage any risks in a safe and consistent manner. This meant people were supported to take appropriate risks and staff were aware of any potential risks to people's physical or mental health.

We looked at how medicines were handled. People were protected against the risks associated with medicines because the provider had appropriate arrangements in place to manage medicines. The records of medicines we checked were complete and accurate.

Are services effective?

People were encouraged and supported to express their views. We observed staff sought people's choices in relation to their daily activities. People were involved in making decisions about their support including their assessment of needs before moving into Bluebell Court.

People discussed their healthcare needs as part of the support planning process and we noted there was guidance for staff on how best to meet people's health needs. This meant staff were aware of people's medical conditions and knew how to respond if there were any signs of deterioration in their physical or mental health.

Staff had the training and support to meet the individual and diverse needs of the people they supported.

Are services caring?

People we spoke with expressed satisfaction with the service and felt supported. We observed interaction between staff and the people they supported. We saw staff engaged and supported people in their daily lives and respected their rights to privacy and dignity.

Each person had a detailed support plan, which was underpinned by a series of risk assessments and daily support records. We saw evidence to demonstrate the support plans had been reviewed on a monthly basis. This ensured staff had up to date information about people's support needs and wishes.

Are services responsive to people's needs?

People were supported to take the lead on how their support was managed and encouraged to express their views about how that support was delivered. People's support needs were kept under review and staff responded quickly when people's needs changed.

People were enabled to maintain relationships with their friends and relatives and take part in activities which were of particular interest to them. People were also supported to undertake voluntary work in the community and attend further education courses.

Although no complaints had been received recently, a system was in place should the need arise.

Are services well-led?

Staff spoken with felt Bluebell Court was well led and organised. The registered manager had a high profile within the service and was able to describe their priorities for improving the service in the year ahead. This meant there was clear leadership at the service and the registered manager was aware of their responsibilities.

The registered manager had good working relationships with the staff team and external agencies so people received personalised support which met their needs. People who lived at Bluebell Court had nothing but praise for the manager, the staff and the support provided.

The registered manager sought and acted upon the views of others. There was a strong emphasis on striving to improve, in order to deliver the best possible support for people who lived at Bluebell Court. There was a variety of systems and methods to assess and monitor the quality of the service. The registered manager was in the process of reviewing the systems to ensure they were current and incorporated best practice for the service delivered.

What people who use the service and those that matter to them say

We spoke with three people who lived at Bluebell Court. People were able to express their views and told us they were very satisfied with the support they received.

People told us they felt safe because there was always a member of staff available twenty four hours a day. One person told us, "I feel safe and secure. I don't feel I have to lock my door."

People told us the support they had received at Bluebell Court had made positive changes to their lives. One person told us, "This place has made such a difference. I have never been so well." People told us they had a good relationship with the staff, who they described as "caring", "supportive" and "great."

People had positive words to say about the leadership at the service. People thought the registered manager had ensured some positive changes had been made from comments they had raised. One person told us, "I am happy to speak to the manager because he would sort it out."



Bluebell 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 of the Health and Social Care Act 2008. It was also part of the first testing phase of the new inspection process CQC is introducing for adult social care services.

We visited Bluebell Court on the 15th April 2014. During our visit there were eight people who lived there. We spoke with a range of people about the service. They included the registered manager, four staff members and three people who lived at Bluebell Court. We also spoke to the contracts department at the local authority in order to gain a balanced overview of what people experienced accessing the service. During our visit, we spent time observing the daily routines to gain an insight into how people's support was managed. We looked at all areas of the building and spent time talking to people in their flats. We also spent time looking at records, which included people's support records, staff training and supervision records and records relating to the management of the service.

The inspection team consisted of a lead 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.

Bluebell Court was last inspected in November 2013. The service was judged to be non-compliant with Regulation 22; Staffing. We used this inspection to see whether the required improvements had been made to staffing levels. We found the service had addressed our concerns.

Are services safe?

Our findings

The registered manager explained there was long term engagement and planning with people before they moved into Bluebell Court. This was described as a transition period and allowed the person to become familiar with the staff and other people who lived there. It also allowed staff to assess if they could meet the person's physical and mental health needs safely. Support records reviewed showed a detailed assessment had taken place before people moved to Bluebell Court.

We spoke with one person who lived at Bluebell Court about the transition period. They told us, "Nothing was rushed." They explained that the staff initially visited them and then they started to visit Bluebell Court. These visits increased in regularity until a time when everyone felt it was the right time to move in. The person told us, "I saw other places which were unsuitable. This place is ideal. It is a safe and clean environment without issues such as drugs and aggression. I feel safe. I know the staff are there if I need them."

When we visited Bluebell Court we saw each of the people who lived there had their own self-contained flat. This meant people had a high level of choice and control over who came into their property and were also free to come and go from the building as they wished.

The registered manager had a positive approach to risk taking so that people's freedom was not restricted. This was achieved through the development of personal support plans and risk assessments which supported and respected a person's rights to take informed risks. Support plans reviewed showed staff had completed thorough profiles for each person. This ensured positive and constructive boundaries for each person to help them stay physically and mentally safe. People we spoke with were very positive about the support they received. They told us they felt safe whilst their freedom was supported and respected. One person told us, "I have got freedom to come and go, but I also know staff are here to help and talk things through."

Where people may display behaviour which challenged others, we saw evidence in the support records that assessments and risk management plans were in place. These were detailed and meant staff had the information needed to recognise indicators which might trigger certain behaviour. Staff told us risk managements plans were discussed daily at staff handovers. This gave staff the opportunity to discuss situations which were likely to be emotionally challenging for people and how best to manage the situation. Staff told us they were aware of the individual plans and said they felt able to provide suitable care and support, whilst respecting people's dignity and protecting their rights.

At our last inspection we were concerned there was not enough staff in the evening and at weekends. The registered manager told us that following the inspection, they had reviewed staffing levels against people's needs and the requirements of the service. There was also consultation with staff and people who lived at Bluebell Court. As a result the staff rota had been amended so that another member of staff was available in the evenings and weekend cover had been increased.

We looked at the staff rotas for the four weeks before our visit. These showed there were three members of staff on duty during the day Monday to Friday, one of whom was a qualified Registered Mental Health Nurse. There were two members of staff on duty in the evening and at the weekend. There was one member of staff throughout the night. People told us they were happy with the current staffing levels. They told us the changes had resulted in increased availability for staff to support them to take part in activities and access the community. The registered manager talked to us about how they tried to ensure the rotas were flexible. They explained how if a person wanted to go out, but required staff support to do so, the rota was flexible so this could be facilitated.

The service had procedures in place for dealing with allegations of abuse. Discussions with staff confirmed they had a good understanding of the type of concern they should report, and how they should report it. Staff members spoken with said they would not hesitate to report any concerns they had about care practices. They told us they would ensure people they supported were protected from potential harm or abuse. Training records confirmed staff had received training on safeguarding vulnerable adults. This meant the staff had the necessary knowledge and information to ensure people were protected from abuse and discrimination.

We saw when a safeguarding concern had been raised with the registered manager, appropriate action had been

Are services safe?

taken. The registered manager had also notified the Care Quality Commission (CQC) of the concern, as was required. This meant effective procedures were in place for protecting the people from potential harm or abuse.

We spoke with staff to check their understanding of the Mental Capacity Act 2005 (MCA). Staff told us the Registered Mental Health Nurses would carry out any mental capacity assessments, should there be concerns about a person's ability to make decisions for themselves, or to support those who lacked capacity to manage risk. Records reviewed showed staff had not received recent training in this area. Such training would provide up-to-date guidance and further underpin staff understanding of capacity. We reviewed the training programmes for staff and noted Mental Capacity Act training was scheduled for all staff.

We looked at how medicines were handled and found appropriate arrangements for their recording, handling and

safe administration. Records we checked were complete and accurate. Medicines could be accounted for because their receipt, administration and disposal were recorded accurately. We saw appropriate arrangements for the safe storage of medicines.

We spoke to staff members who were designated to administer and record medication. Only staff trained and assessed as competent were handling and administering medicines within the service. Having trained staff helped to protect people from the risk of being given their medicines incorrectly.

We spoke with people about the management of their medicines. They told us they were happy with the medication arrangements and had no concerns. One person told us, "One of the best things about being here is that I know I will be prompted to take the right medication at the right time."

Are services effective? (for example, treatment is effective)

Our findings

We spoke with people who lived at Bluebell Court to ask them about their experiences of the support they received. One person told us, "This place has made such a difference. I have never been so well. I get all the support I need and I can ask if I need anything."

Support records we looked at showed there was a period of transition before people moved to Bluebell Court. An assessment of people's needs was carried out and people were invited to visit so they could meet other people and the staff. We noted information was sought from a variety of sources during the assessment process including from health and social care professionals. We looked at two completed assessments during the inspection and noted they covered all aspects of the person's needs. The registered manager explained careful consideration was given to the needs of the existing residents to ensure the minimum disruption when a new person moved into Bluebell Court. The registered manager also made sure a new person's needs could be met within the staffing resources. This approach ensured there were effective systems in place to maintain the safety and well-being of people considering or using the service.

We spoke with people in their accommodation. The flats were self-contained and had all the facilities they needed to stay independent. Whilst speaking with people in their flats we noted that the environment did not feel like a specialist establishment. The layout of the residence provided a very private environment for people who lived there. This was a positive element to the effectiveness of the service.

People were able to express their needs and wishes and be involved in making decisions about their daily lives. People were encouraged to be as independent as possible. They were able to choose the structure of their day, their daily routines and activities. This helped people to develop their independent living skills in a safe environment.

The service used the star recovery programme. This is a tool to support people to create their own wellness recovery action plan, to set out their goals and to identify what help they need to get there, what helps keep them well, and what puts their mental health at risk. The plans of support we viewed showed people had been involved in developing their recovery plan. Plans were reviewed on a monthly basis. This ensured each plan was individualised and progress to achieve the person's goals was at an appropriate level and pace. People we spoke with were very positive about the programme and the impact it had on their progress. One person told us, "The staff have been great in helping me to do planning for my recovery."

People's healthcare needs were carefully monitored and discussed with the person as part of the support planning process. Records we looked at showed that the service worked closely with other health and social care professionals. This meant people's current and changing needs were monitored and reviewed regularly so that timely intervention could be made where necessary.

During the inspection we looked at the training and development opportunities offered to staff. We were shown the training plan for the upcoming year. Training was provided using various methods including practical training from clinical staff or colleagues, external training providers as well as accredited e-learning courses. Staff training records showed staff had received training in safeguarding vulnerable adults, infection control, fire training, first aid and equality and diversity. In addition there was a range of training taking place which reflected good care practices for the people they supported. This included staff development training on mental health awareness, alcohol awareness and substance misuse.

Staff spoken with confirmed they received on-going training and felt supported in their role. From our observations and discussions with staff we found they had the appropriate skills, knowledge and understanding of the needs of the people they supported.

Systems were in place with regards to staff supervisions. Supervisions were held on a twelve weekly basis. These provided staff with an opportunity to discuss events within the service as well as their own training and development needs. Staff told us team meetings were held on a monthly basis, which kept them informed of any developments or changes within the service. Staff told us their views were considered and responded to. We saw evidence these meetings had been held and included discussions around the co-ordination of support provided to people who lived at Bluebell Court.

Are services caring?

Our findings

People we spoke with all expressed they were very happy with the service and the support they received. One person told us, "When I first came here initially to visit, it ticked all the right boxes for me, now I'm here it was definitely the right choice. The staff have been fantastic." Another person told us, "Staff are very supportive, there are lots of staff but they are all familiar and they make me feel cared for."

We spent time in the communal areas of Bluebell Court and were invited to sit with people in their flats. This gave us an opportunity to observe the daily routines and to gain an insight into how people's support was managed. Our observations confirmed there was a positive culture which supported people to be independent. We saw staff had a good relationship with the people they supported. Staff interacted positively with people and talked to them in a supportive and respectful way. Staff ensured they made time for people whenever required and took their time to explain things to people so they didn't feel rushed. Staff showed an interest in what people had been doing and what their plans were.

Staff spoke fondly and knowledgeably about the people they supported. Staff showed a good understanding of the individual choices, wishes and support needs for people within their care. One staff member told us, "We take time to get to know the people we support. We work with them within a supportive environment. It is a gradual process so that we can engage them to take control of their recovery to independence."

The service had policies in place in relation to privacy and dignity. We spoke with staff to check their understanding of how they treated people with dignity and respect. Staff gave examples of how they worked with the person, to get to know how they liked to be treated. One staff member told us, "It is important we are open with people we are supporting and have clear boundaries because people trust us. We must respect their privacy and dignity when supporting them."

We were shown around Bluebell Court by the registered manager. We saw staff knocked on people's doors and waited for the door to be answered before they entered a person's flat. In addition to the individual flats there was a communal lounge. We were told one person did not like people going in their room and advised us to speak with them in the communal area. This showed us people's privacy was respected.

The registered manager had implemented the use of medicine cabinets in each of the flats which were accessed only with the staff. This was seen as a positive way of encouraging people to feel ownership over this aspect of their support needs and allowed medication to be administered in a private and dignified manner.

The registered manager had devised a behavioural contract for people who lived at Bluebell Court which aimed to help people take responsibility and learn from their behaviour and action, which could result in warnings being issued and eventually their tenancy being revoked. The registered manager told us, "We want people to succeed. We don't want to see negative behaviour that can't affect a person's tenancy. We also have a responsibility to ensure everyone who lives here is safe." We saw this agreement had successfully been used as a support mechanism for one person's behaviour to promote respectful and positive attitudes.

We looked in detail at two people's care records and other associated documentation. We saw evidence people had been involved with, and were at the centre of, developing their support plans. This demonstrated people were encouraged to express their views about how their support was delivered. Staff spoken with told us they had access to people's support plans and they were informed if there had been any changes. The plans contained information about people's current needs as well as their wishes and preferences. We saw evidence to demonstrate people's support plans were reviewed with them and updated on a monthly basis. This ensured staff had up to date information about people's needs.

The registered manager told us the service worked closely with other health and social care professionals. This was to ensure people received consistent and co-ordinated support that focussed on the person's individual needs. We saw health care professionals, psychiatrists, social workers and GP's were consistently involved in people's care and support to ensure their physical and mental health needs were met. The registered manager told us reports were provided monthly to the commissioners who had placed people at Bluebell Court. We saw these reports gave feedback on the progress of the person during the month

Are services caring?

and identified any incidents or concerns the commissioners should be aware of. This demonstrated the service had an open and co-ordinated approach to ensuring the people received the support they needed.

Are services responsive to people's needs? (for example, to feedback?)

Our findings

People were provided with information about what to expect at Bluebell Court in relation to their accommodation and the recovery programme. Information included details about the tenancy arrangements and services provided including: therapeutic support, activities, the recovery programme, financial management and medication.

People who lived at Bluebell Court were able to express their needs and wishes and make decisions about their daily lives and recovery programme. From our observations staff interacted well with people. Staff were sensitive to people's needs and offered reassurance and encouragement where necessary. Staff spoken with were aware of how people were to be supported in meeting their individual needs.

We were told where specific decisions needed to be made about people's support and welfare, additional advice and support would be sought. People were able to access advocacy services and information was available for people to access the service should they need to. Examples of when people had accessed advocacy services were mainly when they needed independent advice about their finances.

Staff actively sought, listened to and acted on people's views. People who lived at Bluebell Court were allocated a named member of staff known as a key worker, which enabled staff to work on a one to one basis with them. This meant they were familiar with people's support needs and knew what they wanted to achieve on the recovery programme. One member of staff told us, "A key worker is allocated based on who the person seems to be most comfortable with. Being a key worker allows us to spend quality time guiding people on the right path and support them to move on."

We saw that as part of the star recovery programme, the key worker would discuss the person's progress with them every month. Records we looked at showed these reviews had taken place and new goals set as appropriate. If people's needs changed, their support plans would be reassessed to make sure they received the support they needed.

The service was responsive to people's social, emotional and development needs, particularly for those people looking to move on into more independent living accommodation, ensuring they had the skills and coping strategies to manage. We saw the service had systems in place to recognise the risk of isolation and loneliness for people they supported. People's social network was assessed as part of the star recovery programme. Where people were at risk from social isolation we saw activities and strategies were put in place to support the person to be involved and integrate with the local community. One person told us, "I have really benefited from having people around me and now I don't just sit on my own thinking too much. Staff help me to plan my targets and encourage me to make them happen."

Each person had an individualised and varied programme of activities according to their needs and preferences. People were supported to engage in activities outside of Bluebell Court to ensure they were part of the local community. Two people undertook voluntary work at local charity shops, another person was undertaking further education at college and another person was involved in a gardening project. This demonstrated the service was responsive to supporting each person on their chosen pathway to independence.

We saw the provider had a policy and procedure in place for dealing with any complaints or concerns. This was made available to people who lived at Bluebell Court and their visitors. There had been no formal complaints, however we saw the registered manager took a proactive approach, seeking to respond to any concerns positively before they escalated. None of the people we talked with had any complaints to make directly about the support they received at Bluebell Court. They told us they could, "Approach any member of staff," if they had a complaint or concern.

Are services well-led?

Our findings

We found the service was well-led, with clear lines of responsibility and accountability. All the staff we spoke with were knowledgeable and dedicated to providing a high standard of care and support to people who lived at Bluebell Court.

The manager registered with the Care Quality Commission (CQC) in February 2014. A registered manager is a person who has registered with CQC to manage the service and shares the legal responsibility for meeting the requirements of the law with the provider. Both staff and people who lived at Bluebell Court spoke positively about the leadership of the registered manager.

The provider had systems and procedures in place to monitor and assess the quality of their service. These included seeking the views of people they support through 'resident's meetings', annual satisfaction surveys and care reviews. We saw 'resident's meetings' were held every month and any comments, suggestions or requests were acted upon by the registered manager. This meant people who lived at Bluebell Court were given as much choice and control as possible into how the service was run for them.

People told us since starting in post, the registered manager had made some positive changes. These included increasing the staffing levels so there was more staff available to support people to take part in activities and access the community. In addition the introduction of locked medicine cabinets in people's flats and 'spy hole' viewers to their flat doors had improved people's feeling of safety, privacy and dignity. One person told us, I would be happy to speak to the manager, he would sort it out." Another person told us, "he has made a great difference."

We saw annual satisfaction surveys were completed by people who lived at Bluebell Court. These were produced to get the views of how people thought the service was run. They also provided the opportunity for people to suggest ways to improve the running of the service. We saw the results of the last survey, from January 2014. The results were very positive with all people being satisfied with their accommodation, their privacy within their apartment, access to communal areas and the care and support they receive from staff. All staff spoke of a strong commitment to providing a good quality service for people who lived at Bluebell Court. The manager and staff team work closely together on a daily basis. This meant quality could be monitored as part of their day to day duties. Staff confirmed they were supported by the manager and enjoyed their role at Bluebell Court. One staff member told us, "We have an excellent team. The manager is relaxed but professional, open and honest. He is very supportive and approachable."

Staff attended handover meetings at the end of every shift and monthly staff meetings. This kept them informed of any developments or changes within the service Staff told us their views were considered and responded to. Since starting in post, the registered manager had re-introduced regular supervision sessions as well as annual appraisals. We saw evidence these had taken place. This meant staff were being supported in their roles as well as identifying their individual training needs.

The provider had systems in place to identify, assess and manage risks to the health, safety and welfare of the people who used the service. Records reviewed showed the service had a range of quality assurance systems in place, to help determine the quality of the service offered. These included health and safety audits, medication, care records, people's finances and incidents and accidents. We looked at completed audits during the visit and noted action plans had been devised to address and resolve any shortfalls. This meant there were systems in place to regularly review and improve the service.

We looked at a selection of policies and procedures in relation to the areas inspected on our visit. We noted the registered manager was in the process of reviewing and updating these documents. This was work in progress and needed to be completed to ensure operating policies and procedures reflected best practice. For example the complaints procedure and the whistle-blowing policy had been updated in January this year but up-to-date guidance on the Mental Capacity Act was required to reflect current best practice.

Where incidents had occurred, we saw detailed records were maintained with regards to any safeguarding issues or concerns, which had been brought to the manager's attention. Where appropriate these were reported to CQC. This evidenced what action had been taken to ensure that people were kept safe.