

Forevermore Care Group Ltd

Forevermore Care

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

Forevermore Care is a supported living service which provides support with personal care to people living in their own homes. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. The service provides support to people who have a learning disability, autistic people, people who have mental health needs and people who have a physical or sensory impairment.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection five people received support with their personal care.

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

Right Support:

The service supported people to have the maximum possible choice, control and independence and they had control over their own lives. Staff had completed training to ensure they understood the ethos of the service and to give people choices about their lives and care. People were supported by staff to pursue their interests and to achieve their aspirations and goals.

People had fulfilling and meaningful lives because support focused on their strengths and promoted what they could do. Relatives and care staff told us people had gained skills and independence.

The registered manager supported people to access health and social care support in the community as they needed. People received the support they needed to take their medicines. Staff supported people with their medicines safely and in a way that promoted their independence.

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.

Right Care:

People received kind and compassionate care from care staff. Staff protected and respected people's

privacy and dignity. They spoke about people with respect and were proud of the skills they had gained. The registered manager and their staff understood and responded to people's individual needs.

The registered manager and their care staff understood how to protect people from poor care and abuse. They had training on how to recognise and report abuse and they knew how to apply it. Staff were suitably trained to meet people's needs and keep them safe. People's individual communication needs were assessed, and staff knew how to meet them.

People's care and support plans reflected their range of needs and promoted their wellbeing and enjoyment of life. Staff understood and responded to people's individual needs.

Right Culture:

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the provider and their management and staff. One staff told us, "Forevermore Care helps you with both your personal and professional lives as they don't just care about your professional life."

People were supported by staff who followed best practice guidance and understood people's human rights. Care provided was compassionate, empowering and tailored to people's needs. The registered manager and their staff were responsive, supporting people's aspirations to live a quality life of their choosing. They considered people's wishes, needs and rights during care delivery.

The provider had measures to monitor the risks of a closed culture by ensuring people received support based on transparency, respect and inclusivity. They treated people and their families with respect. Relatives felt the care provided was of high quality. They told us they could raise any concerns and action would be taken.

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

Rating at last inspection

This service was registered with us on 24 August 2020 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Forevermore Care

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Forevermore Care is a supported living service. This service provides care and support to people living in the community in 'supported living' settings so that they can live 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

Inspection activity started on 30 August 2022 and ended on 09 September 2022. We visited the location's office on 30 August 2022. We gathered the views of people's relatives, staff and professionals from 01 to 09 September 2022.

What we did before the inspection

We reviewed information we had received about the service since it was registered. We sought feedback from the local authority and professionals who work with the service. Due to technical problems, the provider was not able to complete a Provider Information Return (PIR). A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the provider's registered manager, the operations director who is also the nominated individual and the human resources manager. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records. This included three people's care records and medication records. We looked at staff recruitment records in relation to recruitment and training. We also reviewed records relating to the management of the service. We spoke to two relatives and emailed all staff to gather their views. Five staff shared their views. We received feedback from one professional. We reviewed further information the provider sent to us.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People were protected from the risk of harm because the provider and the registered manager assessed, monitored and managed safety well.
- The registered manager and their staff had robust arrangements for monitoring risks. This included risk associated with people's health needs, the environment and risk to self and others.
- Staff worked with external professionals to monitor risks to people. Professional guidance was used to guide staff on safe working practices and to keep people safe from avoidable harm during care delivery and while out taking part in community activities.
- People's records included guidance on positive risk taking and positive behaviour support plans. These provide details of situations that may upset people and how to identify when people require emotional support to reduce risks to themselves and others around them. The records were accurate, complete and up to date.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse and improper treatment and their human rights were upheld. Staff had received training on how to recognise and report abuse and they knew how to apply it. They knew people well and understood how to protect them. Where any concerns were identified the provider worked well with partner agencies to resolve them.
- Relatives we spoke with told us they thought the service was safe and felt secure. Comments included, "As far as I can say they are caring and [relative] is safe. I visit randomly and have nothing that concerns me."
- Staff had received training in the use of physical restraint to protect people from harm. The registered manager monitored this to ensure where these interventions were used, they were proportionate and safe.

Using medicines safely

- People received their medicines when they should. Staff had received training in medicines management and regular checks had been carried out to monitor the medicines.
- Medicines administration systems were robust and well organised. There was a policy to support the registered manager and their staff. We noted the policy needed to be updated to reflect how staff would deal with medicines refusals. The registered manager took immediate action and updated the policy during the inspection.
- The registered manager and the provider monitored the use of antipsychotic medicines to prevent the overuse of this type of medicines.

Staffing and recruitment

- The registered manager and the provider ensured there were adequate numbers of suitably skilled staff that were matched to the needs of people using the service. The management team ensured each person they supported had their own team of staff specifically recruited for them.
- The provider's recruitment, assessment and induction training processes promoted safety and the culture and values of the service. The provider carried out robust checks on new staff before they started work. This included carrying out a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staff told us they felt there were enough staff to support people with their needs. Comments included; "Yes there are adequate numbers of staff, in our service we are fully staffed with two people working each 12-hour shift." And, "There is an on-call system in place with the number available to all staff. As the on-call is monitored 24 hours a day there is always support available if required."

Preventing and controlling infection

- People were protected from the risk of infection. Staff had received training in infection prevention and control and food hygiene.
- People were adequately protected during periods of national restrictions, the service followed national guidance to reduce the risk of infection.
- The service had kept up to date with changes to government guidance during the COVID-19 pandemic. The provider had ensured guidance was shared with staff to keep them and people they supported safe.

Learning lessons when things go wrong

- There was a process that ensured when accidents and incidents occurred these were appropriately recorded, investigated and areas for improvement identified and acted on. The registered manager followed good practice guidelines. They carried out monthly analysis to discuss incidents in the service and discuss ways to minimise them.
- Staff also looked at what worked for each individual and how to improve the way they respond to people during times of distress.
- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and registered manager investigated incidents and shared lessons learned.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- People received the care they needed because staff had completed comprehensive assessments of each person's physical and mental health before they started receiving support from the service.
- The service had a thorough approach to planning and coordinating people's move from other services. Arrangements fully reflected individual circumstances and preferences. Where people with complex needs were admitted into the service, there was a period of transition which was well managed. This had resulted in a coordinated, holistic and smooth transition for people with very little disruption and difficulties for staff.
- People's needs, and choices were assessed with them and/or others acting on their behalf. This fed into the support plans and risk assessments, which gave clear detailed information about the support each person needed and preferred routines. Staff were clear on the importance of following the routines and preferences. People, or where appropriate relatives and advocates, were involved and consulted when reviewing care plans. Comments from relatives included, "I am regularly informed of any changes or plans about my relative's care."
- The provider and their staff consistently referred to current legislation and best practice guidance to achieve effective outcomes. We saw up-to-date information related to behavioural support, mental health, skin care and oral health was included within care plans. They had quickly adopted recent recommendations on learning requirements for staff who support people living with a learning disability.

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 particular 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 provider was working within the principles of the MCA. Requests for applications had been made to deprive people of their liberties for their safety. Staff were following conditions where authorisations had been approved. In addition, there were efforts to enhance people's freedom of movement. We observed people were supported to be part of their local community with some reasonable restrictions based on their needs and risks.
- The provider had procedures to seek people's consent in various areas of their care. We saw best interest decisions had been carried out with relevant authorities and were recorded where people lacked capacity. Staff had assessed people's ability to make decisions regarding their care and treatment. They had received training in the MCA and showed a good understanding of the MCA principles.

Staff support: induction, training, skills and experience

- The provider had supported staff with relevant skills and knowledge to carry out their roles effectively. Staff told us they regularly updated their training. In addition, staff told us induction training was provided and supported them to get to know people well and provide the right support for them. Comments from staff included, "My induction involved an overview of the service I was going to be working in along with background of the service users I would be supporting." And, "Before commencing in my current service we had training with a professional who has worked with the [person receiving support] for a long time, we also had in-reach visits for a number of weeks prior to the individual moving into his property."
- Staff told us they felt supported by the registered manager to maintain their competence and skill. One staff told us, "I felt prepared for my role as a support worker from my induction but more so from my experience working in mental health, I had a meeting with my service user who I would be supporting prior to me supporting them."

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked collaboratively with other professionals to facilitate the delivery of joined up care and support to people. They worked alongside other professionals during assessments to facilitate transition from other services. This had resulted in seamless and successful transition of care especially from long stay hospitals and an increase in staff's confidence in responding to complex needs. Professionals told us staff referred people in a timely manner. We saw advice given by healthcare professionals was acted upon and included in people's care records.
- People were effectively supported to meet their nutritional needs. Staff considered people's independence and choice to tailor each individual's nutritional support.
- People's health needs were assessed and planned for before they started receiving support from the service to make sure they received the care they needed. Staff maintained regular links with specialist health care professionals and effectively included guidance provided to manage people's health needs.

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

- The service was designed around people's needs and wishes and used innovative ways to help people to be as independent as possible.
- The registered manager and the provider ensured that people's accommodation was based on their needs and each person lived in a single tenancy accommodation. This was a person-centred approach to service design.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- Staff had a person-centred approach and people were encouraged to do as much for themselves as they possibly could, being actively involved in every aspect of their support. This ranged from being involved in staff recruitment interviews and training.
- Feedback from relatives was overwhelmingly positive. For instance, one relative said, "This is the best service that we have had for a long time and I can say [relative] has been as smart and well kempt as I have ever seen them." All relatives we spoke with gave extremely positive feedback. One relative said, "It's like home from home, we are always made welcome when we visit and there is a sense that it's our relative's own home."
- The provider recognised people's diversity and promoted this in their policies, which highlighted the importance of treating everyone as individuals. People's choice for privacy and dignity was respected and upheld by staff who had received training in equality and diversity. A staff member told us, "Forevermore Care is a very inclusive provider enabling people from any walk of life regardless of sexual orientation, race or religion the opportunity to progress and develop themselves personally and professionally."

Respecting and promoting people's privacy, dignity and independence

- The service had a person-centred culture. The values in the services motivated staff to support people in a compassionate and kind manner.
- All staff members who shared their views with us were passionate about encouraging people and supporting them to achieve best outcomes and were proud of the difference they made to people's lives. Comments from staff included, "The staff at forevermore spend a lot of time with one another and it is impossible not to form bonds, we work together like a family and I do think that anything is possible for our clients because of that support."
- Staff supported one person who had a lack of confidence and anxiety to take part in the community. They introduced the person to the local community and to take part in community events such as flower planting. This supported the individual to develop confidence to feel valued and respected as a member of the local community.
- Staff treated people well and respected each person's individuality. People's care plans focused on their abilities and goal setting was prioritised. Another person's care plan provided in-depth information for staff to be able to support them in a safe and effective way minimising the risk to the person and the public.

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

- People were supported to express their views and with decision making. Care records contained evidence the person who received care or a family member had consented to the care and were at the centre. The

registered manager involved all relevant people in decisions about the care provided.

- Staff positively welcomed the involvement of advocates. Independent advocates were involved with people on a regular basis.
- People or their relatives and advocates were involved in reviewing and updating their care plans, which were detailed and specific to each person's individual needs. Staff made sure people were aware of what information was being kept about them and their ability to decline care should they wish to do so and have capacity to do so.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. 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

- Staff and the registered manager maintained person-centred culture and ethos within the service. Staff showed an understanding of what was important to people, their preferences and needs, and how best to meet them. This was supported by the feedback we received from professionals and family members, who told us they could not praise the skill, dedication and commitment of staff highly enough.
- People received personalised care which met their needs and took account of their preferences and abilities. Each person had a detailed person-centred care plan to guide staff on how to support them. The care plans were written in a positive way based on people's abilities as well as the support they needed.
- People's preferences were identified, and they were included in choosing which staff supported them.

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.

- The service took steps to meet people's information and communication needs to comply with the Accessible Information Standard. Staff ensured information was available to people in an accessible way. They used plain language and illustrated information with signs and gestures, or pictures where it assisted people to understand information more easily. Written information, such as how to complain, was produced in easy to read formats and illustrated with pictures and photos.
- People had care plans that set out how they should be supported in communication. Staff were seen communicating very effectively with people, who had a range of individual communication methods and needs.

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

- The registered manager and staff encouraged people to have a positive attitude. Arrangements for social activities and, where appropriate, education and work, was inclusive, met people's individual needs, and followed best practice guidance so people could live as full a life as possible. People were supported to set goals and aspirations and people had the freedom to take risks in a way that enriched their lives.
- The service had made positive links with local colleges and communities. People benefitted from opportunities this presented, both in the support to attend meaningful day time activities and gaining paid employment within the community.

- People were supported to develop and maintain friendships that were important to them. One relative told us they could visit their relative anytime without restriction.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure that was shared with people and their relatives when they started using the service. Relatives we spoke with knew how to raise concerns.
- We saw that complaints had been dealt with in line with regulations and measures had been put in place to address the complaint satisfactorily. The registered manager told us they had used the learning from complaints to reflect on staff practices.

End of life care and support

- People's end of life wishes including their resuscitation status had been recorded in their care plans.
- There was no one receiving end of life care. People and their relatives had been given the opportunity to express their wishes.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- There was a positive culture within the service, encouraged by the leadership and implemented by a staff team who were passionate and motivated about achieving the best outcomes for people. This was clear to see throughout our inspection. Staff were allocated different areas of responsibility and were accountable for their area of responsibility.
- There was strong organisational oversight of the service. This included regular systematic management site visits to each person's house to review the quality of the service provided. Each person had a service leader who monitored their staff team. The registered manager and the nominated individual subsequently provided regular oversight on service leads.
- A programme of effective quality assurance and checks was in place. Audits gave clear actions for staff to take and where improvements were identified there was evidence discussions took place and if necessary further training and support provided. These checks helped to sustain quality and drive improvement.

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

- The provider and registered manager had established clear, person-centred vision and values that included honesty, involvement, compassion and dignity. People's relatives told us the service was well-led. Our observations showed leaders and managers shaped the culture in the service by engaging with staff, people who use services and other stakeholders. One relative told us, "The [name removed] manager is great, the director [name removed] is a great person to talk to, he will deliver on his promises."
- The provider and the registered manager kept up to date with best practice and shared learning from other similar services to look at ways in which they could improve the service for people.
- People, their relatives and professionals gave us positive feedback regarding the leadership of the service. One professional told us, "They are an excellent, effective leadership team who have always gone above and beyond to resolve issues. [name removed] the director sets the tone for the rest of the team."

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

- The registered manager was committed to transparency in the management of the service and to deliver the best service possible. They also recognised the importance of learning when things went wrong and sharing that learning with others.
- We saw examples of accident and incident records that had been completed and trend analysis. There

was evidence of how the organisation engaged with other services to learn from significant events.

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

- People were treated as equals and as individuals and with respect. The registered manager encouraged feedback and acted on it to continuously improve the service. For example, the provider carried out surveys across the organisation seeking staff and people's views of the care provided and what was important to them.
- The provider maintained an open culture and encouraged people to provide their views about how the service was run. Relatives told us the registered manager was visible throughout the service. The provider and the registered manager had sought the views of people they supported and family members through care plan reviews and staff meetings.
- All the feedback received from professionals and people's relatives was positive. Evidence we saw demonstrated people were satisfied with the service and were actively encouraged to live their lives to the full.

Working in partnership with others

- Staff in the service had developed and promoted positive working relationships with commissioners, other social care staff, advocates and health care professionals. The service was working in partnership with local colleges, learning disabilities and mental health services to support people. Staff told us this was improving the lives of people who used the service and promoted their independence and wellbeing.
- Staff told us they could contribute to the way the service was run. Staff meetings were organised for all staff to give them an opportunity to discuss any changes to the organisation and working practices and raise any suggestions.

Continuous learning and improving care

- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible. The service provided people with high quality care which promoted their rights and positive outcomes.
- The provider kept up to date with national policy and best practice guidance to inform improvements to the service.