

Next Stage 'A Way Forward' Ltd

Next Stage 'A Way Forward'

- St Pauls Court

Inspection report

St. Pauls Court St. Pauls Street Bury BL9 6BF

Tel: 01613126854

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Ratings

Overall rating for this service	Good •
Is the service safe?	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

Next Stage St Paul's offers personal care and support to people living with mental health needs and learning disabilities and/or autistic spectrum disorders. People live independently in their own flats situated in St Paul's church, Bury. People are supported to develop their independent living skills as well as maintain their own tenancy. Staff are available throughout the day and night-time; hours of support vary depending on the assessed needs of people. At the time of our inspection there were 17 people using the service.

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.

People's experience of using this service

Work had been completed to improve the focus and structure of the service since the last inspection. A new service model was introduced providing structured staffing arrangements as well as improved support plans. Comprehensive assessments had been implemented, providing clear direction for staff helping to reduce the level of risk previously presented.

Right support – People were encouraged and supported to remain independent and were involved in the provision of care they receive. 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 personalised care that was tailored around their likes, wishes and preferences. Information was provided in different formats depending on the individual needs of people. A review of support plans reflected this.

Right Culture - The ethos, values and attitudes of leaders and care staff helped to ensure people were encouraged to live confident, inclusive and empowered lives. In partnership with people, the team assisted them to maintain their own tenancy as well as access activities and opportunities within the local and wider community.

Systems were in place for the reporting and responding to any complaints and concerns. The registered manager liaised with relevant agencies to ensure people were protected. Where necessary, advocacy support was being explored offering people independent support.

Safe recruitment procedures were followed. A structured rota had been implemented offering more consistent support for people. Further recruitment was taking place to fill current vacancies and increase flexibility. Staff spoken with felt the new structure was working well and there was a good mix of skills within the team.

Internal and external safety checks were completed to ensure the premises was kept safe. The landlord was actively involved and took responsibility in completing all maintenance work. Relevant infection control procedures were in place in line with guidance.

The management and administration of people's prescribed medicines was safe. Individual support plans and risk assessment were in place outlining the level of support required.

Systems were in place providing monitoring and oversight of the service. A service action plan had been drawn up exploring areas of improvement to the service. Opportunities were provided for people, staff and other parties to comment on the services provided. Staff spoke positively about the registered manager. Health and social care professionals, who also provided feedback, were complimentary about the services provided.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 27 January 2021).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service between the 17 December 2021 to 5 January 2022. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve areas of safe care and treatment and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe, Responsive and Well-led, which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Next Stage St Paul's on our website at www.cqc.org.uk.

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?	Good •
The service was safe.	
Details are in our safe 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.	



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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 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 provides care and support to people living in a 'supported living' setting, 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

We gave the service short notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 31 August 2022 and ended on 21 September 2022. We visited the location's office on the 31 August 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who worked with the service. We used all of this information to plan our inspection.

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 six people who used the service and the relative of one person. We also spoke with four members of staff including the registered manager, service manager and two support workers. During the inspection visit we looked at the management of people's medicines and reviewed support plans.

Additional evidence, sent to us electronically, was reviewed remotely. These included; three people's care records, recruitment information, health and safety, policies and procedures as well as audit and checks of the service.



Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to ensure risk assessments and support plans were sufficiently detailed, reviewed and kept up to date so potential risks to people and others were effectively and safely managed. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

Assessing risk, safety monitoring and management

- Systems were in place to minimise the risks to people and the environment.
- Potential risks to people's health and well-being were assessed and planned for. Information provided clear guidance for staff to help support and respond to any concerns.
- People raised concerns about the safety and security of the building and grounds. The registered manager confirmed work to repair the entrance gate had been planned. People were also to be reminded the main entrance was to remain closed as all those living at St Paul's had their own key.
- Internal safety checks were completed and record. All maintenance work was managed by the landlord. Checks included the passenger lift, small appliance, mains electric and fire safety. We noted repairs were required to the passenger lift; arrangements were being made to address this.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place for reporting and responding to concerns, so people were kept safe.
- Safeguarding policies and training were available providing key information to guide staff. Staff spoken with confirmed they had completed training in adult protection and were confident in reporting any issues or concerns.
- A concern was raised with us during the inspection. A safeguarding concerns was raised with the local authority. A request for independent advocacy support was to be made to help support the person.
- Cause for concern forms were completed when incidents arose. Safeguarding supervisions were held with staff to reflect on practice and what could be learnt.
- People we spoke with said they felt safe. The relative of one person said, "[Relative] is 'really happy. the happiest they've ever been'.
- Positive feedback was received from professionals about the teams handling of any concerns. We were told, "The staff feedback to me when there is an issue and they raise safeguarding's appropriately."

Staffing and recruitment

- Appropriate recruitment checks were in place for both permanent and agency staff working at Next Stage St Paul's.
- On-going recruitment was taking place to fill current vacancies and increase flexibility. As part of the service action plan the service 'aims to recruit an excess of 20% additional supporting hours to cover staff sickness/annual leave.'
- A structured rota has been implemented offering more consistent support to people. One person described staff as, "Pleasant, respectful and kind."
- Whilst there had been some changes in the staff team, staff spoken with felt this had been positive for the service. Adding, "New staff have brought fresh ideas" and "We've a good team with different strengths."

Using medicines safely

- People's prescribed medicines were managed safely.
- Staff were guided by clear policies and procedures as well as medication training. Additional observations were carried out to ensure practice was safe.
- Risk assessments and support plans detailed the varying levels of support people received.

Preventing and controlling infection

- Detailed policies and procedures were in place. Information had been reviewed and updated to reflect Public Health and Government guidance.
- Appropriate management plans were put in place following an outbreak at the service to minimise the impact on people.
- Staff said they had access to personal protective equipment (PPE), which was worn when visiting people in their flats and carrying out certain tasks. This was seen during the inspection.



Is the service responsive?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's needs were met through good organisation and delivery.

At our last inspection the provider had failed to ensure support plans were sufficiently detailed to guide staff in meeting the specific needs of people. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

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

- Comprehensive plans provided clear guidance to guide staff in the support people needed.
- Records showed that people had been involved and consulted about their individual needs and wishes.
- Daily communication and handover sheets provided good information, such as, an overview of support provided, appointments attended or areas to follow up. One staff member told us, "These are running documents, constantly changing and everyone has input."
- We received positive feedback from professionals about the planning and delivery of people's support. We were told, "They [staff] understand the persons needs really well and have worked hard to build a relationship", "The key worker that organises the care plan and is very professional" and "They [staff] work flexibly which is really important for the person I work with."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

• People were involved and consulted about their support. Information was provided in different formats depending on the individual needs of people. These included pictorial and easy read, the use of a wipe board and Makaton cards.

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 living at Next Stage St Paul's had varying levels of support. Whilst some people were independent following activities of their choosing, others had support from staff.
- Feedback from people was mixed about the activities and opportunities available to them. Whilst some people were very active, others felt opportunities were limited. The registered manager acknowledged

activities had decreased due to COVID-19. However, these were now being reintroduced with support from the 'Social Values Manager' who assisted people and staff in accessing a range of activities and opportunities within the local and wider community.

- People spoken with said they enjoyed some of the communal activities, such as, day trips, Sunday dinner and theme nights. As part of the service action plan, refurbishment of the communal lounge and kitchen area was being completed, providing a more comfortable area for people to socialise. In addition, the registered manager was looking to identify a driver who was qualified and willing to drive the minibus owned by the provider.
- One person's relative told us, "[Relative] loves it. They like that it is busy with people and the general hustle and bustle, especially the social and communal aspects."

Improving care quality in response to complaints or concerns

- The provider maintained detailed policies and procedures regarding the complaints process.
- Any issues brought to the registered managers attention were recorded and acted upon.
- An 'easy read' copy of the complaint's procedure displayed within communal areas, therefore easily accessible to people and their visitors.
- Some of the people we spoke with said they were able to share concerns 'without hesitation'.



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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection the provider had failed to establish a clear focus and purpose of the service to help mitigate risks and make the necessary improvements in quality and safety. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

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

- A new service model had been introduced providing an improved structure with regards to the purpose of the service. This process had helped to provide more focused support and reduce the level of risk previously identified. One staff member told us the new model. "Works really well, lots of clients are responsive and engaging well."
- Systems and process were in place to monitor and provide oversight of the service. Managers at the service had developed a 'service action plan' outlining goals to achieve over the coming months. This focuses on staffing, people's experience and the environment.
- The registered manager was aware of their legal responsibilities and kept CQC informed of significant events, where necessary.
- Staff spoken with felt there was clear leadership and support provided. The registered manager was described as a "Good leader, who puts a lot of effort in." Other comments included, "She's visible and accessible" and "Very supportive and has a goal for St Paul's."
- The registered manager was aware of the requirement for staff to complete formal training in Learning Disability and Autism. Once available all staff will be enrolled on the training as well as being incorporated into the new staff induction programme.
- As part of the service action plan, we were told office arrangements were to be changed providing better privacy and confidentiality.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

• Tenant meetings were now being reintroduced. These included representatives from the housing group so

people were able to discuss any wider issues in relation to their tenancy.

- One person told us, "I enjoy the monthly tenant meetings they give clients a place to air concerns and ideas."
- As part of the 'service action plan', the registered manager had been liaising with the human resources team on the distribution of surveys so that feedback could be sought from people.
- A handover sheet had been devised to help keep all staff informed update and informed about events within the service, Staff spoken with said they had found this, "Helpful" and "Good information sharing." Other opportunities included meetings and supervisions.

Working in partnership with others

- The service worked closely with a number of health and social teams involved with people at Next Stage St Paul's. Records are maintained of any communication or appointment evidencing any discussion and action agreed.
- Health and social care professional spoke to as part of the inspection were complimentary about the registered manager and staff team. We were told, "Since the current manager joined there has been a marked improvement in their communication and care" and "They work flexibly, which is really important. I am very happy with the care that they provide the person I work with."
- The registered manager had also received a compliment following the successful transition made by one person. They said, "Overall it's been a pleasure to work with you (registered manager) and your team. Please thank everyone from myself and my managers as your service has been greatly appreciated, and I like to think we have built a really positive working relationship with you and St Pauls in general."