

## St Anne's Community Services

# St Anne's Community Services - Sunderland

### Inspection report

North East Business and Innovation Centre  
Unit 107i, Wearfield, Enterprise Park East  
Sunderland  
Tyne and Wear  
SR5 2TA

Tel: 01915166098

Website: [www.st-annes.org.uk](http://www.st-annes.org.uk)

Date of inspection visit:

16 October 2019

24 October 2019

07 November 2019

Date of publication:

16 January 2020

### 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

St Anne's Community Services – Sunderland is a domiciliary care agency providing personal care to six people living in independent supported living tenancies.

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.

The service has 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

Relatives described how their family member had made good progress since accessing the service. One relative commented, "It is smashing, [family member] is a different person now, calmer now. Because [family member] is calmer, they understand and get their point across."

People showed they had a good understanding of safety in their house and were supported to be actively involved. Staff told us the service was safe. They knew how to report safeguarding and whistle blowing concerns if needed. Medicines were managed safely.

There were enough staff to meet people's individual needs. New staff were recruited safely with people involved in the process.

Staff received good support and training. People supported to have enough to eat and drink and to access healthcare services.

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's had been thoroughly assessed to ensure their care needs and preferences were identified.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (published 19 April 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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 ●

# St Anne's Community Services - Sunderland

## **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

One inspector carried out this inspection.

#### Service and service type

This service provides care and support to people living in three '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.

The service had a manager registered with the Care Quality Commission. This means 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 we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 16 October 2019 and ended on 7 November 2019. We visited the office location on 24 October and 7 November 2019.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with three people who used the service about their experience of the care provided. We spoke with three members of staff including the registered manager and support workers. We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We spoke with three relatives.

# 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 has 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 understood the procedures to keep them safe. They demonstrated what they would do in an emergency, such as a fire in the house.
- Relatives and staff confirmed the service was safe. One relative commented, "Oh yes [family member is safe], I have no worries about safety."
- The provider dealt with safeguarding concerns thoroughly.
- Staff understood the safeguarding and whistle blowing procedures. They told us they would not hesitate to raise concerns if needed. One staff member said, "St Anne's are always providing updated information about whistle blowing"

Assessing risk, safety monitoring and management

- Risk assessments were completed to help ensure people and staff were safe.
- There were up-to-date procedures to ensure people continued to receive care in emergency situations.

Staffing and recruitment

- People had a consistent and reliable staff team; there were enough staff to provide a personalised care service. One relative commented, "It is ideal with it being one to one care."
- The provider followed safe recruitment practices when recruiting new staff; people were supported to be involved in the recruitment process.

Using medicines safely

- Staff supported people to take their medicines when they were due; accurate records were maintained to show what support people had received.
- Some people had been supported, with guidance from professionals and advocates, to successfully reduce the amount of medicines they took.
- Management checked staff followed the agreed medicines management procedures.

Preventing and controlling infection

- Staff followed the provider's infection control practices.

Learning lessons when things go wrong

- There were systems to log and investigate incidents and accidents.

# 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

- People's needs had been fully assessed; this included reviewing their preferences, as well as any cultural, religious or social wishes they had.

Staff support: induction, training, skills and experience

- Staff received good support and the training they needed. One staff member said, "I appreciate the support I get."
- Training, supervisions and appraisals were up to date.

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

- Staff supported people to have enough to eat and drink and to follow a healthy diet.
- People's eating and drinking support requirements were documented in care plans for staff to follow.

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 access health care services; care records provided details of health professionals involved with each person.

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

- The service was flexible to people's needs and changes were implemented without delay.

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.



- Staff had an in-depth understanding of people's communication needs. They used this to effectively support people to make daily living choices and decisions.
- Role play was used extensively to help people understand situations and determine whether they had capacity. For example, how to use their bank account.

# 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 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

- People continued to be well cared for; staff had an excellent understanding of people's needs.
- People confirmed they were happy with their care.
- Relatives gave very positive feedback about the care provided and the staff team. They commented, "They are all excellent, they look after him so well" and "[Family member] has always been happy there and contented. Staff treat [family member] very well".
- People and staff had especially good relationships. People were relaxed around the staff team. Staff were enthusiastic and motivating when interacting with people.

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

- Staff actively encouraged people to make as many choices and decisions as possible. People were supported to be fully involved in their care.
- People's communication needs had been assessed and their support needs documented in communication care plans. Staff followed these when supporting people.
- Relatives and independent advocates were involved in decision-making in line with people's needs. Information about independent advocacy services was available for people in an easy read format.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with the utmost dignity and respect; staff understood the importance of adjusting people's care to achieve this. One relative told us, "[Family member] gets on with all the staff. They treat [family member] with respect and dignity."
- People's independence was promoted as much as possible. Some people accessed the local community independently, whilst others helped around the house.
- Relatives were welcome to visit or phone the service at any time.

# 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.

### 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 supported people to communicate their views so they could participate when decisions were made affecting them.
- Information was shared with people in line with their individual needs. This allowed them to be involved in many aspects of the service, such as using role play and technology. This meant people could be involved in recruiting new staff and health and safety checks.
- Relatives confirmed their family members received good support with communication. One relative said, "It is smashing, [family member] is a different person now, calmer now. Because [family member] is calmer, they understand and get their point across."

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

- Staff had a good understanding of people's needs, which meant they knew about people's preferences. They used this knowledge to interact with people in ways that mattered to them. For example, one side of the house was lively and exuberant to engage the people who lived there, whereas the other side was calm and relaxing to meet other people's needs.
- Care plans were personalised and focused on promoting choice, dignity and independence. Pictorial information was used in care plans to aid people's understanding. Care plans focused on what was important to people and what they were able to do themselves.
- Assistive technology was also used to promote people's independence and safety. Staff supported people who experienced hearing loss. They installed a call bell in the bathroom, so people could call staff when they had finished bathing. A special clock had also been purchased so the person could choose when they woke up.

### 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

- Staff supported people to lead an active life based around their interests. Relatives commented, "They are brilliant for that [providing activities and engagement]" and "[Family member] goes bowling and shopping. Wherever he wants to go they are quite happy to go along with it."
- Some people had been involved in local community projects and forums. For example, a beach cleaning project and a 'mate crime forum'. This allowed them develop new social links and to share their experiences

with others. Learning and good practice was identified and shared with other St Anne's services.

- People were supported to maintain and develop relationships with important people in their lives. One relative commented, "[Family member] visits me every weekend, the staff bring him over" and "We can phone or visit anytime."

Improving care quality in response to complaints or concerns

- The provider had a clear focus on supporting people to understand their right to complain. One staff member said, "We do work [with service users] about how to complain. As a result people successfully challenged decisions which affected them, to ensure they were treated equally and fairly."
- Information about the provider/s complaints procedure was communicated to people in different ways depending on their needs.
- There had been no recent complaints about the service, although the provider had an accessible complaints procedure.
- We only received positive feedback about the service, relatives knew how to complain if they had concerns.

End of life care and support

- Care plans contained information about what was important to people, this included any preferences for their future care needs.

# 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 good. 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; 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

- Staff were committed to deliver the provider's values of providing high quality, person centred care and being a caring organisation.
- The provider and registered manager ensured people needs were central to how the service operated.

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

- The registered manager was proactive in submitting notifications following significant events at the service.
- Relatives and staff felt the registered manager was approachable. One relative told us, "There is no problem with them [the registered manager and deputy]. Any issues I can just ring them up and they will sort things out." One staff member said, "We have a fab management team, they are very supportive."

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

- People, relatives and staff were encouraged to share their views about the service; any suggestions were acted on.
- The provider had a service user involvement group who were involved in recruiting new staff. Their contribution was valued with people paid for their input at the same rate as a support worker.
- The provider's easy read newsletter was used to share important information about the service.

Continuous learning and improving care

- The provider had a structured approach to quality assurance; this was effective in identifying areas for improvement.
- The quality and safety team regularly shared examples of good practice with all the provider's services.

Working in partnership with others

- The provider worked with local commissioners to promote good outcomes for people.