

Select Support Partnerships Ltd

Select Support Partnerships Ltd - Blackburn

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

This announced inspection took place on 14 and 15 September 2017. We last inspected the service in October 2015 when we found it was meeting the regulations we reviewed.

Select Support Partnerships (referred to throughout the report as Select Support) is registered to provide personal care to people in their own homes. The service specialises in providing support to people with a learning disability or who have mental health needs. Support is provided both to individuals and to people living in small group settings in Blackburn with Darwen, Lancashire and Wigan. At the time of our inspection there were 74 people using the service.

The provider had a registered manager in place as required by the conditions of their registration with the Care Quality Commission (CQC). A registered manager is a person who has registered with the CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People told us they had no concerns about their safety when they received support from staff employed by Select Support. They told us staff always treated them with respect and supported them to develop their independent living skills. Recruitment processes were sufficiently robust to protect people from the risks of unsuitable staff

Staff had received training in safeguarding adults. They were aware of the procedure to follow should they witness or suspect abuse. They told us they would also be confident to report any poor practice they observed from colleagues and were confident their concerns would be taken seriously by the registered manager.

People who received support from staff to take their prescribed medicines told us they had no concerns about this. We saw appropriate systems were in place to help ensure the safe handling of medicines.

Risk assessments were in place in relation to each individual's mental health needs as well as any environmental risks; these helped to protect the health and welfare of people who used the service and staff. Arrangements were in place to help ensure the prevention and control of infection.

Staff told us they received the induction, training and supervision they needed to be able to deliver safe and effective care. The induction programme in place included training in safeguarding adults and children, the Mental Capacity Act (MCA) 2005, equality and diversity, first aid and fire safety. Staff were also required to complete a period of shadowing more experienced staff before they were allowed to work independently without close supervision.

The provider was working within the principles of the Mental Capacity Act (MCA) 2005. Staff were able to tell

us how they supported people to make their own decisions and choices. A range of communication tools were used by staff to help people engage in discussions about their care and support.

Staff had a good understanding of people's needs and goals. They demonstrated a commitment to providing high quality care which was personalised and tailored to the needs of each individual. People who used the service told us they were always able to make changes to their support plan should their needs or interests change.

There were numerous opportunities for people who used the service to comment on the support they received. We noted the responses in the provider's most recent satisfaction survey were all very positive. A number of compliments about the positive impact of the service had also been received from relatives and professionals involved in people's care.

Staff we spoke with told us they enjoyed working in the service and that the registered manager was supportive and approachable. Regular staff meetings meant that staff were able to make suggestions about how the service could be improved. Staff told us their views were always listened to.

There were systems in place to monitor the quality and safety of the service. The registered manager demonstrated a clear commitment to continuing to drive forward improvements in the service.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

People told us they felt safe with the staff who supported them.

Staff had received training in safeguarding adults and knew the correct action to take if they witnessed or suspected abuse.

Systems were in place to help ensure the safe handling of medicines.

Is the service effective?

Good ●

The service was effective.

Appropriate action had been taken to help safeguard the rights of people who were unable to consent to their care arrangements.

Staff had received the induction, training and supervision they required to support them to deliver effective and personalised care.

People received the support they needed to access healthcare services. Staff encouraged people to make healthy choices regarding the food they purchased and cooked.

Is the service caring?

Good ●

The service was caring.

People provided positive feedback about the caring nature of the staff who supported them.

We saw the service focused on supporting people to be as independent as possible.

We saw evidence that the service regularly provided support to people who used the service and their families which went over and above the hours they were commissioned to provide.

Is the service responsive?

Good ●

The service was responsive.

People told us staff were responsive to their needs. We saw staff supported people to access a range of community based activities to meet their individual needs and interests.

There were systems in place for people to provide feedback on the quality of care they received. Any complaints received were fully investigated.

Is the service well-led?

The service was well-led.

All the people we spoke with spoke extremely positively about the registered manager for the service. Our discussions with the registered manager showed they had a clear commitment to driving forward improvements in the service.

Staff we spoke with told us they enjoyed working in the service and felt valued by the provider.

Systems were in place to assess and monitor the quality and safety of the service provided.

Good ●

Select Support Partnerships Ltd - Blackburn

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 and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We told the provider two working days before our visit that we would be coming. This was to ensure the registered manager and staff would be available to answer our questions during the inspection. On 14 September 2017 we visited the registered office and spoke with the registered manager, the managing director, 10 staff, six people who used the service and an external professional. On 15 September 2017 we again visited the registered office and spoke with a further member of staff.

The inspection team consisted of one adult social care inspector. Before the inspection, we asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. Prior to the inspection we reviewed the completed PIR, previous inspection reports and the information we held about the service such as notifications, complaints and safeguarding information. A notification is information about important events which the service is required to send us by law. We also contacted the Local Authority safeguarding and commissioning teams as well as community based professionals to gather their views about the service.

During the inspection we looked at the care records for four people who used the service. We also looked at a range of records relating to how the service was managed; these included four staff personnel files, training records and policies and procedures. We also looked at the responses from the provider's most recent customer satisfaction survey.

Is the service safe?

Our findings

People who used the service told us they had no concerns about their safety when supported by staff from Select Support. Comments people made to us included, "I feel safe when I go out with support workers", "Staff come each week and do a safety check on my flat" and "I feel safe in my house."

We reviewed the systems in place to safeguard the people who used the service from the risk of abuse. Policies and procedures for safeguarding people from harm were in place. Staff we spoke with were able to explain the correct action that they would take if they witnessed or suspected that abuse had occurred. They told us they would also feel able to report any poor practice they observed and were confident the registered manager would take any concerns very seriously. One staff member commented, "If I raised any issues, the manager would listen and act on them right away." Another member of staff told us, "Poor practice is not tolerated in this company."

The service had a system in place for providing 'safeguarding supervision'. This process allowed staff the opportunity to discuss any safeguarding issues which had arisen, review how they had been dealt with and identify any lessons which could be learned, including where additional training was required. We noted the local authority had commended the service on their 'lessons learned' approach to the safeguarding of vulnerable individuals during their annual quality assurance visit in October 2016.

Several of the people who used the service told us staff supported them to manage their money in order to protect them from financial exploitation from others. They told us this arrangement worked well and helped to ensure they were able to meet their financial responsibilities.

We looked at the personnel files for four staff employed to work in the service to check if safe recruitment procedures had been followed. All files contained an application form in which applicants were required to document their full employment history and explain any gaps in their employment. Checks had been carried out with the Disclosure and Barring Service (DBS). The DBS identifies people who are barred from working with children and vulnerable adults and informs the service provider of any criminal convictions noted against the applicant.

We noted three of the four staff files included two references. Due to a misunderstanding which we identified during the inspection, only one reference had been returned for a staff member who was still in their induction period. The registered manager took immediate action once this error had been highlighted and ensured the relevant staff member was removed from working with people who used the service until a second reference was received. Shortly after the inspection we were provided with confirmation that this reference had been received.

The registered manager told us there was a system in place for involving people who used the service in the recruitment of staff. One person who used the service confirmed they had been part of recruitment panels, including those for senior staff although none of the staff we spoke with could recall that people who used the service had been part of their recruitment process. We saw that 'one page profiles' had been developed

for staff. We were told these were used to help match the skills and interest of staff to the people they supported.

Recruitment records we reviewed showed applicants were required to complete a literacy and numeracy test as part of the interview process; this helped to ensure staff had the necessary skills to be able to fulfil the role for which they had applied.

People told us they were supported by a consistent team of support workers who always had time to spend with them. Staff told us they worked flexibly to ensure people were supported to attend any activities of their choice.

We looked at the arrangements in place to provide people with support to take their prescribed medicines. We saw there was a policy and procedure for the administration of medicines which staff were required to follow in order to ensure safe practice. The registered manager told us all staff had received in-house training on the safe administration of medicines. Records we reviewed showed all staff were observed to check they were competent to administer medicines safely before they were able to work without supervision.

We looked at the medication administration records (MARs) held at the registered office for three people who used the service. We saw that these records had been audited to help ensure people had received their medicines as prescribed. The registered manager showed us records which documented the action which had been taken for any errors identified; this included additional training and observations to ensure staff competence.

From the care records we reviewed we saw that people's support plans included information about what staff should do to help them to stay safe. Risk assessments had been completed for activities people wanted to do such as swimming and as well as those relating to road safety, personal care and the management of medicines. We saw that risk assessments detailed the benefit individuals would gain from taking risks as well as any control measures which needed to be put in place. Risk assessments had been regularly reviewed and updated when people's needs changed. One member of staff told us, "I always make sure I read the support plan. It tells you what risks to take or not to take."

We saw there were systems in place to ensure the properties in which people lived were safe and that regular checks were carried out by staff in relation to each home environment. Staff told us, wherever possible, they would encourage people who used the service to participate in health and safety checks in their property.

We looked at the arrangements in place to help prevent the spread of infection. Staff told us, should they provide intimate personal care, they were provided with personal protective equipment (PPE) to help reduce the risk of cross infection.

We saw the service had a business continuity plan in place in the event of an emergency which disrupted the ability to deliver care and support to people. This provided information about the actions which would be taken to minimise the risks to people who used the service and staff. An on call system was in place to provide staff with advice and support outside of normal office hours.

We noted a lone working policy had been introduced since the last inspection for staff working in the community. This meant staff were expected to contact the registered office or on call manager by text to confirm their safety at the end of each shift. An additional buddy system was also in place for staff working in

supported living settings to check that everyone was safe and there were no staffing issues.

Is the service effective?

Our findings

People spoken with told us staff had a good understanding of their needs and had the skills to offer them appropriate support. One person told us, "Staff know what I need. If I have any problems they are there to sort things out." Another person commented, "I thought my life was over before I found out about Select Support. Staff have got to know me over the months. I really get on with [name of staff member]; she understands me."

We saw a number of positive comments about the difference the support offered by Select Support had made to people's lives. One professional had written, "I'm really pleased with how [name of person using the service] is getting on. She is out and about every day and most evenings and has full support with everything she needs. I haven't seen her looking as happy and well as she does for a long time." One relative had commented, "I think you have picked the right support worker for us. [Name of staff member] is really nice and seems to be getting to know [Name of relative's] quirks quite well." Another relative had provided feedback to staff after they had supported their family member to attend a drama course. They had written, "In 41 years of knowing [name of individual] we have never seen her dance and perform with such confidence."

We looked at what consideration the provider gave to the Mental Capacity Act (MCA) 2005. The 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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. However, people cared for in their own homes are not usually subject to Deprivation of Liberty Safeguards (DoLS). We noted the registered manager had taken appropriate action to help ensure that, where necessary, any restrictions in place to ensure people received the care they required were legally authorised by the Court of Protection.

We saw the provider had procedures in place to assess the capacity of people to make particular decisions, should this be necessary. Where appropriate, care records included guidance for staff about the action they should take to ensure support was provided in accordance with people's best interests.

People who used the service told us staff always respected any decisions they made about how they wanted their support to be provided. One person commented, "They [staff] are very good. You can do anything you want." Another person told us, "Support workers always ask what you want to do. I enjoy going round the market." A staff member told us, "We allow people to take risks and make decisions which might fail but from which they can learn."

We looked at the way new staff were trained and supported to work in the service. We saw that the initial induction programme included training in safeguarding, consent, the Mental Capacity Act (MCA) and DoLS,

equality and diversity, first aid and fire safety. The registered manager told us staff who had not previously worked in a care setting were expected to achieve the Care Certificate; this qualification aims to equip health and social care workers with the knowledge and skills which they need to provide safe and compassionate care. During their induction new staff also spent time shadowing more experienced members of staff in order to familiarise themselves with the needs of people who used the service by reading care plans and spending time in their company. Before the end of the induction period, direct observations were carried out by senior staff to ensure new staff members were competent to work independently without close supervision.

We spoke with two members of staff who had been recently recruited. They told us their induction had prepared them well for their role and they were confident they were able to provide people who used the service with safe and effective support. One staff member commented, "The induction has been good. I have been working in one of the houses alongside other staff to find out how things work. I did all my online training before I started and I definitely feel ready to work on my own now."

During the inspection we spoke with a representative from the external training provider used in the service to support staff to gain nationally recognised qualifications. They told us they had been working with the service for six years and was impressed with the high quality support people received. They told us, "Staff have a good understanding of people's needs. People get good support from a staff team who know how to recognise if they are not happy." As a result they told us they had seen people who used the service progress and develop their skills.

We saw that there was a system in place to ensure staff completed annual refresher training in required topic areas. Staff were also provided with training to help them meet the specific needs of the people they were supporting, for example those with epilepsy or diabetes.

Staff personnel records showed staff were provided with regular supervision. Supervision meetings provided an important opportunity for staff to discuss their progress and any learning and development needs they might have. We noted that an agenda was used for each supervision session which covered topics including service user updates, communication, personal development/training and management support. Staff also received an annual appraisal of their performance. We saw that inductions, supervisions, training and team meetings were recorded in a staff management matrix.

Support plans we looked at were personalised and contained good information for staff about how each individual wished to be supported and the goals they wished to achieve. We saw that support plans had been regularly reviewed to help ensure they were fully reflective of the care people required.

People supported by the service lived in their own homes and could therefore eat what they wanted. Staff told us, if they were required to support a person with food shopping or making meals, they would always encourage them to make healthy choices wherever possible, although they recognised they had to respect the choices people made. One person who lived in a supported living setting told us, "We take it in turns to do the shopping. We make a list of what we need." We saw that, where necessary, arrangements were in place to assess and monitor the nutritional needs of people who used the service.

We noted people who used the service had health action plans in place. These are documents which record the support an individual needs to stay healthy. We saw that these had been reviewed regularly with people to ensure they remained up to date. People who used the service told us that staff would always contact health professionals for them such as their GP if they had any concerns about their health. We saw that staff from Select Support worked in partnership with community based professionals to help ensure each person

received the support they required. People told us staff would always accompany them to health appointments if they requested this, even if this meant rearranging their schedule to accommodate them.

Is the service caring?

Our findings

People who used the service told us staff were kind, caring and respectful towards them. Comments people made to us included, "Staff are kind. They treat me well", "I feel like the staff are like family. They are all very concerned to make sure I am ok" and "Staff are all very pleasant. They always knock on my door before they come in."

During the inspection we observed warm and friendly interactions between staff and people who used the service when they came to the registered office. We noted people were made to feel welcome and staff were interested in finding out about their daily lives.

All the staff we spoke with told us the service placed a high priority on equality and diversity. They were able to give us examples of how they provided support to meet people's individual needs, including those related to religion, ethnicity and gender. All the care records we reviewed contained person centred support plans which included information about people's social, cultural and health needs.

One staff member spoken with told us they were in the process of organising training about gender identity for both staff and people who used the service; this demonstrated the service was committed to improving the experience of people accessing and working for Select Support.

People told us staff supported them to develop their independent living skills. One person commented, "Staff have come with me on the bus to develop my confidence. We did the route together a few times but I can do it on my own now."

We saw that care records were focused on identifying the support people required to meet their individual goals. Where possible people had been involved in developing and reviewing their support plans. One person told us, "I know I have a support plan. If I want to change anything I can just let them [staff] know."

The registered manager told us, where necessary, they supported people to access advocacy services; these services provide independent support to help people understand their rights and express their views to health and social care organisations.

Staff spoken with demonstrated respect for the fact that they were working in people's homes. They told us they would always knock on arrival at the property and wait to be invited in unless the person had consented to them entering their home using a key safe. Policies and procedures also advised staff of their responsibilities in relation to gaining consent from people to use their Wi-Fi, if applicable, to complete documentation in relation to their support needs. A staff member also told us that in some supported living settings, people who used the service had developed house rules which staff were expected to follow.

We saw staff had received information about confidentiality and data protection to guide them on keeping people's personal information safe. All care records were stored securely in the registered office in order to maintain people's confidentiality.

Care records we reviewed contained brief information about individual's wishes in relation to funeral planning, although there was not detailed information about the support each person would wish to receive from Select Support if they were at the end of their life. However, the registered manager showed us a document from another person's records which detailed how staff should ensure their cultural wishes were adhered to at the time of their death.

The registered manager had developed an 'above and beyond' file which documented the support the service had provided to people over and above any commissioned hours, most of which related to organised social events. Within the file we also saw evidence that, at the request of a family, the registered manager had supported them to organise the funeral for their relative who had died suddenly. We saw that both the registered manager and managing director had also assisted the family to deal with the financial affairs of the person following their death. We saw feedback from the family which stated, "We feel [name of person] has had the happiest time of their adult life while with your company. The team did an excellent job with him; thanks for everything the team has achieved."

Is the service responsive?

Our findings

People told us staff were always responsive to their needs. One person commented, "They [staff] always ask me what I need; that's a daily thing." A staff member told us, "It's all about what people want to do; that's how it should be."

We noted that assessments were completed with people before they started to use the service. The registered manager told us this assessment was used to determine if the service could offer the appropriate level of support a person needed and also to find out about their interests and personality so that staff could be matched to these as far as possible.

We saw that information from the assessment had been used to develop support plans which documented the support people required to meet their needs; this included personal care, physical health, finances and maintaining contact with family and friends. We saw that support plans had been created with people who used the service using photographs and pictures to help them understand and contribute to what was included in the plans.

Staff told us about the various communication methods they used to involve people in making decisions about the support they received; these included pictures, photographs and sign language. We saw that care records also included guidance for staff about how best to support each individual with their communication needs. We noted the review undertaken for one person by a local authority stated, "The staff team have a detailed communication passport and have received training around communication styles and tools to support [name of person] with their communication."

We found there were numerous opportunities for people who used the service to provide feedback on the support they received; these included support plan review meetings, tenant meetings in supported living services, service user forums, discussions with staff at the registered office and satisfaction surveys. We saw that comments from both people who used the service and staff were on display in the registered office and that these were all extremely positive. Comments from people who used the service included, "I like Select Support Partnerships and I like the support staff helping me with the activities and voluntary work" and "I enjoy the parties and coming into the office to see managers, support staff and service users. I like the staff who support me."

We looked at the results from the provider's most recent satisfaction survey and saw that all the responses were 100% positive. Comments respondents had made included, "I am happy with the support I get from my staff" and "I feel like I have a good relationship with my support workers. I enjoy going to different activities with them."

Care records we reviewed showed people who used the service had an activity planner in place tailored to meet their individual needs and interests. We noted staff supported people to access a range of community based activities including those relating to education, fitness and people's leisure interests. In addition, the registered office was used to host events throughout the year to enable people who used the service to

socialise together, develop new friendships and celebrate birthdays and cultural events such as Eid, Easter and Christmas. People who used the service told us they found these events to be extremely enjoyable. Staff also told us these events helped to promote a sense of team working across the organisation.

One person who used the service told us how they were volunteering in the office on a weekly basis to continue to develop their employability skills.

We looked at the systems in place to manage complaints received in the service. We noted the registered manager maintained a log of all feedback received including complaints and compliments. We saw that the number of compliments far outweighed the small number of complaints received. All complaints had been thoroughly investigated in line with the company's procedure and feedback given to the complainant. We saw an easy read version of the complaints procedure was included in the service user guide which was given to each person who received support from the service.

Is the service well-led?

Our findings

All the people spoken with during the inspection provided extremely positive feedback about the registered manager and their drive to ensure people were provided with high quality personalised support. Comments people made to us included, "[Name of registered manager] is amazing. She always thinks of service users and staff", "The manager knows everyone and they know her. It is a relaxed, friendly and open environment", "[Name of registered manager] is outstanding as a manager. She has got to know me and my interests. I like wildlife and birds so we went out together. She bought a kite and we flew it together" and "People do a really good job here. I would recommend it as a company to work for. We want to try and help people have a better quality of life."

The service had a registered manager in place who had registered with CQC since the last inspection. They were supported in the day to day running of the service by four team managers, each of whom were responsible for services in a particular geographical area.

The registered manager reported to the managing director and a board of trustees. The registered manager and managing director were both present throughout the inspection and demonstrated an in depth knowledge of the people supported by the service.

Before our inspection, we checked the records we held about the service. We found that the service had notified CQC of accidents, serious incidents, safeguarding allegations and DoLS applications as they are required to do. This meant we were able to see if appropriate action had been taken by the service to ensure people were kept safe. We also looked at the feedback from people who used the service and staff which had been gathered through questionnaires sent by CQC prior to the inspection. We noted this feedback included very positive comments from staff on the leadership of the service.

During our inspection our checks confirmed that the provider was meeting the requirement to display their most recent CQC rating. This was to inform people of the outcome of our last inspection.

We found there were a number of ways in which staff, people who used the service and their families were involved in the running of the agency. Regular service user and carer forums were held in which people were asked for their views on how the service could be improved as well as being kept informed of service developments. A service user representative was also in post; their role was to support senior staff in undertaking audits in supported living settings as well as gathering feedback from people who used the service both formally and informally. They told us they enjoyed this role and felt valued and respected by all the staff team.

We saw there was a suggestion box in place in the registered office. The registered manager told someone had recently used the suggestion box to request a computer be provided for the use of people who used the service. They told us they would take this suggestion to the next board meeting and were confident the request would be actioned.

The managing director told us how people who used the service were involved in delivering training to staff and developing the newsletter which was sent out across the service; this celebrated people's achievements as well as informing them about future plans and events.

All the staff spoken with told us they felt valued and respected by the registered manager and that they were always treated fairly. They told us the culture of the organisation was one in which staff were able to put forward views and suggestions about how the service could be improved. The registered manager told us staff received financial rewards for suggestions they put forward which were considered to be beneficial for the business.

Records we reviewed showed the registered manager sent letters of recognition to staff who had demonstrated excellent practice. A 'Star' award was also voted for by staff every three months with the successful staff member rewarded with shopping vouchers. These processes helped staff to feel valued and respected.

Records we looked at showed regular staff meetings took place. We saw that issues such as safeguarding, policies and procedures and communication were regularly discussed and that staff had the opportunity to put forward their views. We saw that positive feedback was also given to staff during the meetings.

We noted the service had achieved the Investors in People Award in 2014; this award recognises strong leadership and a commitment to continuous improvement. We were told the service was in the process of reapplying for this award before the three year period expired.

We looked at the systems in place to monitor the quality and safety of the service. A number of checks were completed by senior staff including those relating to care records and direct observations of staff when they provided people with support. A programme of audits was also in place and we noted actions had been taken where any shortfalls were identified in order to continue to drive forward improvements in the service.

The registered manager showed us an external audit commissioned by the service in November 2016 which had assessed the compliance against CQC's fundamental standards; this demonstrated a commitment to continuous service improvement. The audit had assessed the service as Good overall.