

St Anne's Community Services

St Anne's Community Services - Shared Lives

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

St Anne's Shared Lives is based in Leeds and recruits carers who can offer a home to an adult with learning disabilities, mental health issues, physical disability, alcohol issues and older people. St Anne's Shared Lives match carers to people needing support. They are responsible for the recruitment, approval, supervision, and training of these carers. Shared Lives schemes offer an alternative to both residential and more traditional care at home services for people who need personal care and support with their day to day lives. The Care Quality Commission (CQC) regulates the provision of personal care for people who use the service. At the time of our inspection there were 81 people who used the service and 108 shared lives carers providing their support.

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

People told us they felt safe living with their shared lives carer and that they were well treated. Managers and shared lives carers understood their responsibilities for keeping people safe from the risk of abuse and they were confident about reporting any concerns about people's safety.

People received care and support in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Risks to people were assessed and managed in a way that promoted people's independence. Shared lives carers completed training in topics of health and safety, and they were confident in dealing with emergency situations.

Safe recruitment procedures were followed. The fitness and suitability of office-based staff and shared lives carers was thoroughly assessed before they were recruited to support people using the service, and they received the training they needed for their role. People were matched with a shared lives carer who could best meet their needs.

Safe infection prevention and control (IPC) measures were followed to minimise the risk of the spread of infection, including those related to COVID-19.

Medicines were managed safely. Clients were supported to manage their own medication where possible. Shared lives carers were suitably trained to manage medication should this be required.

The culture of the service was person-centred and inclusive. People and shared lives carers spoke positively about the way the service was managed describing the manager as fantastic, Knowledgeable and very supportive.

There were effective systems to monitor the quality and safety of the service which included obtaining the views of people and others. There was good partnership working with others to make sure people received

all the care and support they needed.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

- The shared lives model of care maximised people's choice, control and independence.

Right care:

- People received care which was person-centred and promoted people's dignity, privacy and human rights.

Right culture:

- The ethos, values, attitudes and behaviours of United Response shared lives management team and shared lives carers helped ensure people lead confident, inclusive and empowered lives.

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 good (published 12 June 2018).

Why we inspected

We inspected due to the length of time since the last inspection.

We undertook a focused inspection to only review the key questions of Safe and Well-led. Our report is only based on the findings in those areas reviewed at this inspection. The ratings from the previous comprehensive inspection for the Effective, Caring and Responsive key questions were not looked at on this occasion. Ratings from the previous comprehensive inspection for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has stayed the same based on the finding from this inspection.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

St Anne's Community Services - Shared Lives

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 team consisted of 1 inspector and 1 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

St Anne's, Shared Lives is a shared lives scheme which provides people with long-term placements within shared lives carers own homes.

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 a registered manager was in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we wanted to be sure the registered manager would be available to support the inspection.

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 work with the service. We used all this information to plan our inspection.

During the inspection

During our visit to the office we spoke with the registered manager and 2 social workers. We spoke to 5 clients and 9 carers. We requested a variety of records relating to the management of the service, including policies and procedures.

Following our visit to the office the expert by experience spoke over the telephone with 6 shared lives carers. We also contacted 2 social workers who provided further feedback. Records that were shared on the portal were reviewed including audits undertaken feedback from clients and carers, support plans and risk assessments.

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 was good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people were assessed, monitored and safely managed.
- Risk assessments were completed to determine the level of risk people faced and the measures needed to reduce the risk of harm to them and others. Positive risk taking was considered to enable people to take risks as part of an independent lifestyle.
- Checks were carried out on the homes of shared lives carers to make sure their accommodation was safe and suitable.
- Social workers and shared lives carers were knowledgeable about the risks clients faced and how to support people safely. Risks to people were kept under review and their care and support plans were updated to reflect any changes to their care and support needs.
- Shared lives carers completed training in topics of health and safety including dealing with emergencies. They were provided with details of who they needed to contact for support in the event of an emergency.

Systems and processes to safeguard people from the risk of abuse

- There were processes and systems to protect people from the risk of abuse.
- Social workers and shared lives carers had completed safeguarding training and were knowledgeable about the different types and indicators of abuse. They told us they would not hesitate to report any safeguarding concerns to the manager of the service or directly to the local authority safeguarding team.
- One of the Shared Lives social workers is a Freedom to Speak Up Guardian (FTSUG) and has completed some detailed training in this role. The FTSUG works with colleagues to raise awareness in the organisation around speaking up and whistle-blowing.
- The registered manager understood their responsibilities for safeguarding people from the risk of abuse. They knew which agencies they were required to notify in the event of an allegation of abuse.
- People told us they felt safe living with their shared lives carer and were treated well. They said they knew who to tell if they had any concerns about their safety.
- Shared lives carers and clients asked informed us that they knew all the social workers in the team. One person said "although we have an allocated worker, I could go to any of the team and they would help."

Staffing and recruitment

- Staffing and recruitment processes were safe.
- People were matched with a shared lives carer who could best meet their needs.
- Following one social worker vacancy the registered manager spoke with part time staff regarding increasing hours until the vacancy was filled to ensure continuity for carers and clients.
- A range of pre-employment checks were carried out on staff and shared lives carers to check their fitness

and suitability for the role. Checks included 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.

Using medicines safely

- Medicines were used safely.
- Most clients managed their own medication and this is discussed with their social worker and monitored as required.
- Shared lives carers with responsibilities for managing medicines had completed medication training.
- Care records included details of medication prescribed to people and the level of support they needed from their shared lives carer.
- Shared lives carers maintained a record of the medicines they administered to the client, and these were checked on a regular basis by their social worker.

Preventing and controlling infection

- We were assured that safe measures were in place and followed to minimise the spread of infection including those related to COVID-19.
- Managers, staff and shared lives carers had received training in infection prevention and control and the use of PPE and they were provided with the most up to date IPC guidance.

Learning lessons when things go wrong

- There were procedures for reporting any accidents or incidents within the datix risk management information system.
- The registered manager and quality and continuous improvement team (QCIT) will analyse accidents and incidents to identify patterns and trends and work with the registered manager and team to reduce the risks of the same incidents occurring.

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 was good. At this inspection the 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.

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

- The manager understood their role and responsibilities and regulatory requirements; including events they are required to notify CQC about.
- The registered manager and social workers provide support to shared lives carers and the people they supported. The registered manager runs a shared Lives Carers support group which gives them the opportunity to gather feedback on carer & client interactions.
- Social workers and shared lives carers had clear lines of responsibility and access to the providers policies and procedures to guide them on current national guidance and best practice.
- A range of checks and audits were completed at regular intervals to assess and monitor the quality and safety of the service. Where areas for improvements were identified they were actioned promptly.

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

- The ethos and values of managers, staff and shared lives carers promoted a culture which was person-centred and inclusive.
- People told us they felt well supported by the registered manager and social worker and that they had formed positive relationships with them.
- Shared lives carers felt the service was well-managed. Their comments included "They really look after us, everything needed is there. We are very happy with them; they are a great company to work with." And another said ""he went into hospital earlier this year and then had to move elsewhere to meet his increasing needs. Shared lives were 100% supportive
- The manager understood their responsibilities under duty of candour.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Registered Manager, social workers, shared lives carers and clients worked in partnership with others to make sure people received all the care and support they needed.
- The views of clients and shared lives carers was obtained through care reviews, meetings, general discussions and surveys. Shared lives carers told us they had 6 weekly visits to their homes and telephone calls to check on how the placement was going and with offers of support. Their comments included; "I feel like I just have to pick up the phone and they will be here". [named social worker] is exceptionally good at

talking to [name]. He keeps him calm and is honest with [name]. He is so good at what he does."

- During COVID-19 restrictions, shared lives carers and the people they support were invited to take part in remote events organised by the provider, including quizzes and art classes. A shared lives carer told us how these events had provided them and the client with opportunities to meet and socialise with new people virtually.
- Registered Manager, social workers and shared lives carers maintained good links with other resources and organisations in the community to support people's preferences and meet their needs.