

Arrow Support Limited

# Arrow Support Limited

## 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

Arrow Support Limited provide personal care and support to people who have general health and mental health care needs and who may have a learning disability. The support is provided to people who live in their own homes in Plymouth and the surrounding area. The office is accessible to people with mobility difficulties and there are car parking facilities close by. At the time of this inspection Arrow Support Limited was supporting 17 people with personal care needs. Packages of care varied from daily visits to 24 hour care. Some people had 24 hour care packages. The service has been registered with the Care Quality Commission for nine years.

Some of the people who lived in the home had limited communication and mental health needs so we spoke to some people and also used observations to understand people.

At the last inspection, the service was rated Good.

At this inspection we found the service remained Good.

Why the service is rated good:

There is a registered manager in post who was also the provider. A registered manager is a person who has registered with the Care Quality Commission 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.

The management team were committed to providing a high quality effective service to people. They did this by supporting staff well, listening to people's views using their preferred means of communication and looking at ways to continually improve. One person said, "It's a very good service, they do everything for me well." A relative told us, "They are absolutely marvellous. We had an agency before who were a nightmare. With Arrow you couldn't ask for more. I can't speak highly enough of them."

The registered manager/provider and management team aimed to provide a service which met people's emotional needs as well as supporting people with physical tasks. They aimed to ensure people with mental health and physical needs were empowered to live a fulfilling life in the way they chose. This included ensuring people could access the community and do activities and hobbies they enjoyed safely by reducing barriers and supporting them in a very person centred way. For example, one person with physical disabilities was able to continue enjoying nightclubs and DJing because support workers had thought about how they could ensure easy access by constructing a DJ booth. People told us they appreciated the visits and support from support workers who were always cheerful. One person said, "They are nice. They listen to me and know what I need."

All staff were well motivated and committed to providing a service that was very personalised to each

individual. People were fully involved in planning their care and support and care plans were very comprehensive to make sure staff had all the information required to support the person. People not only had input into their care plans but used ways to communicate their content that worked for them. For example, some people had videos and arts and crafts incorporated into their plans, making them a project they enjoyed doing with support workers. This helped to make sure people got the support they wanted in a way that suited them.

There were quality assurance systems which monitored standards and ensured any shortfalls were addressed. People and staff felt listened to and said they could speak with a member of the management team at any time. The deputy manager said, "It's good to bounce ideas off each other. When the registered manager went on leave, the systems worked and we felt confident keeping the agency running well." Any complaints made were fully investigated and treated as learning to enable the service to improve.

People received effective, safe care which met their individual needs and preferences. People told us the service was flexible and made adjustments to accommodate their wishes and changing needs. Where people wanted to try new activities, there were clear risk assessments and discussions about how to make this an enjoyable, positive experience for the person. This included ensuring staff knew what to do, trying out road routes and looking at the most appropriate swimming pools for example. Where any concerns were raised about a person's health or well-being prompt action was taken to make sure they received the support and treatment needed.

People were very complimentary about the staff who supported them. People told us staff were kind, caring and respected their privacy and dignity. There were sufficient numbers of staff employed to ensure people received their care and support at times of their choosing and from staff who knew them well and matched their personalities. Each person had a small team of care professionals who they were able to build trusting relationships with. The registered manager tried to match staff to people using the service to promote good relationships. One person had overcome their anxiety by working with staff they knew. They now were more independent with minimal support and had a job. A support worker said, "What we do makes a difference every day. I love working for Arrow."

Staff were well trained and competent in their roles. Staff undertook training in health and safety subjects and received the training and information they needed to meet people's specific needs. People told us they felt safe and comfortable with the staff who supported them, which we saw. One person had an up to date notice board which told them what was happening each day. This enabled them to feel secure and reduced their anxiety.

People and a relative described the service as very reliable, telling us that support workers arrived on time and stayed followed people's individual care plans. People knew who was supporting them and kept diaries so everyone knew what people were doing each day and what support was required.

Further information is in the detailed findings below

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Arrow Support Limited

## **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 checked 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.

This was a comprehensive inspection, it took place on the 7 August 2017.

Prior to the inspection we looked at information we held about the service such as notifications and previous inspection reports. The provider completed 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. At our last inspection of the service, in February 2015 we did not identify any concerns with the care provided to people.

During the inspection we met with five people who lived together in their own supported living shared house. Some people were unable to fully express themselves verbally so we observed how staff interacted with people. The nominated individual/deputy manager was also available throughout the inspection. We also spoke with one relative and one person receiving care over the telephone, the care co-ordinator, a senior support worker, two support workers and the administrator.

We looked at a number of records relating to individuals' care and the running of the home. These included three care and support plans and records relating to medication administration, staff recruitment and training and the quality monitoring of the service.

## Is the service safe?

### Our findings

The service continues to provide safe care. Some people were unable to fully express themselves but appeared to be very relaxed and comfortable with the staff who supported them. A relative told us they believed their relative was very safe receiving support from Arrow. They said, "They never let us down. It's a relief to know that they are OK and living their life. They are all great support workers."

To help minimise the risk of abuse to people, staff all undertook training in how to recognise and report abuse. Staff also received training in how to recognise and report abuse during their induction period. Staff we spoke with were very clear about their responsibilities in respect of keeping people safe from abuse and were confident that any concerns reported would be dealt with promptly. The deputy manager told us how they worked with the local police to ensure there were proportionate and understanding responses for people living with mental health needs in the community. The person's risk assessment gave clear actions to take relating to social boundaries, how the person may respond to situations and what responses worked effectively. One support worker said, "If I reported anything I know it would be acted on immediately to make sure the person was safe." Staff confirmed they would have no hesitation in reporting any concerns to the registered manager/provider or office team and were confident that action would be taken to protect people. There had not been any safeguarding events in the last 12 months.

People's risk of abuse was further reduced because there was a suitable recruitment process in place for all new staff. This included carrying out checks to make sure new staff were safe to work with vulnerable adults. Staff were not allowed to start work until satisfactory checks and employment references had been obtained.

There were sufficient numbers of staff to keep people safe and make sure their needs were met. Staff were matched to individual people and were initially supported to ensure the relationship worked on both sides. The staff member who completed the staff rotas said it was important to make sure they had the right staff to work with the right people. They also made sure if a staff member was absent there was another appropriate support worker available, for example to cover sickness and annual leave. People all received a two weekly staff rota so they knew who was going to support them, which was particularly important for people with anxiety.

Staff confirmed additional staff were available when needed to help people with specific activities or appointments. Most people enjoyed accessing the community with support, either physically or in planning and preparing so people were safe going out alone. Some people had been supported to enjoy holidays abroad, attend hospital appointments and social events. During the inspection one person rang to say they had an appointment, a change in their support time was arranged over the phone. People were sensitively supported to meet others and socialise. The deputy manager said they also reviewed how an event had gone to see how it could be improved next time or any changes made to arrangements. This showed that it was important that people were safe but this was balanced with promoting independence and managing 'real' risk proportionately.

Risk assessments were completed to ensure people were able to receive care and support with minimum risk to themselves and others. People identified at being of risk when going out in the community had up to date risk assessments in place. For example, where people may place themselves and others at risk, there were clear guidelines for staff managing these risks. People also had risk assessments in place regarding their behaviour that may challenge. These were very detailed, often describing the route to a destination people liked to take and exactly how staff should carry out tasks to minimise this behaviour occurring. For example, one person liked staff to put their equipment handles in their hands and then they could manage independently. Staff ensured they did all they could to enable people to take risks safely when they wanted to try new activities. For example, staff supported one person with physical disabilities to access a sailing boat using a hoist. This showed staff followed risk assessments to provide consistency for people and to keep them safe but also to enhance people's lives and promote new opportunities.

People received their medicines safely from staff who had completed up to date training. There were systems in place to audit medicines practices and clear records were kept to show when medicines had been administered. Some people were prescribed medicines on an 'as required' basis. There were instructions to show when these medicines should be offered to people. Records showed that these medicines were only administered in accordance with the instructions in place.

People were protected from the spread of infections. Staff understood what action to take in order to minimise the risk of cross infection, such as in the use of gloves and aprons and good hand hygiene to protect people.

## Is the service effective?

### Our findings

The service continued to provide people with effective care and support. Staff were competent in their roles and had a very good knowledge of the individuals they supported which meant they could effectively meet their needs.

People were supported by well trained staff. Staff said they were provided with regular updated training and in subjects relevant to the people receiving support, for example epilepsy training. A relative said, "The support workers are great. I can't speak highly enough. They never let us down and are all lovely." People told us they had no problems, commenting, "The support workers are very good, they do everything for me and know what I need." One staff member said, "They have two systems for training so we can choose when we are free to attend which makes it easier. We do training when we have met the people we are going to support during our induction. Then we can ask relevant questions that help improve our care." For example, staff attended specific training for moving and handling that related to the actual equipment the person used.

People were supported by support workers who had undergone a thorough induction programme which gave them the basic skills to care for people safely. Staff were encouraged and supported to complete the Care Certificate, a nationally recognised care qualification. The induction included very thorough handover experience with the people they would be supporting, including working with more experienced staff for as long as necessary. This enabled them to get to know people and how they liked to be cared for. Staff told us they had been able to shadow more experienced staff until they felt confident to provide care on their own. New staff had regular supervision and support for the first three months. This ensured new support workers were able to share any concerns and their line manager was able to make sure that they were providing an appropriate standard of care to people. The deputy manager told us about two new staff who had been matched specifically with a young person receiving support so they had things in common. They said, "[Support worker's name] is fantastic and new to care support. They are doing very well. We are so pleased when there is a good match for people and the feedback has been good."

Each person who used the service had a small team of support workers who supported them. This enabled any changes in their health and well-being to be observed and monitored. People's health was monitored to help ensure they were seen by appropriate healthcare professionals to meet their specific needs. For example, one person had been discharged from hospital and Arrow staff had recognised their discharge plan did not reflect their needs. They had then worked with a local community learning disability worker to make sure the person had the treatment and emergency plan they needed. Each person using the service had a hospital passport to make sure they received the support they needed if they were admitted to hospital. This document contained information about their health needs, how they communicated and the things that were important to them.

People were encouraged to make choices about the food they ate. Each person had their own menu, a kitchen to cook their meals and went shopping for their own food. Staff knew how people liked to take their meals, whilst promoting healthy eating they enabled full choice and support with budgeting so people

could be as independent as possible. For example, staff had advocated for people with their landlord to ensure they had satisfactory cooking equipment in their house. One person told us they had the food and drink they enjoyed, liked and chose. Where there were concerns about a person's weight staff sought advice from relevant professionals and followed any recommendations made in discussion with the person.

Staff had completed training about the Mental Capacity Act 2005 (MCA) and knew how to support people who lacked the capacity to make decisions for themselves. People were encouraged to make day to day decisions. Where decisions had been made in a person's best interests these were fully recorded in care plans. Some decisions needed reviewing but people were happy they were receiving the right support for their needs. One relative said they also understood about mental capacity because staff were very good and spoke with support workers about any issues only if their relative was happy with their involvement. Records showed independent advocates and healthcare professionals had also been involved in making decisions. This showed the provider was following the legislation to make sure people's legal rights were protected.

## Is the service caring?

### Our findings

Arrow Support Limited continued to provide a caring service to people. Some people had received a service for a number of years and had built strong relationships with the staff who worked with them. People appeared comfortable with the staff working with them and there was a sociable but calm atmosphere when we visited people in the shared house, for example. People were living their lives with discreet, kind support from staff.

Without exception everyone we spoke with said staff were always kind and caring. Comments included, "Marvellous", "lovely", "my mates" and, "They are awesome."

Staff had received a number of compliments about the care they provided. One comment was from a health professional who had written about a staff member, "I want you to know how impressed I have been today. She listened...turned the mood around so the person had a good day. She researched and prepared a selection of activities to reduce the potential for any conflict when [people's names] are working together. I really admire and appreciate her approach."

Staff went out of their way to bring new opportunities for people and access the community. Care plans described fun things for people to do when being supported by one support worker or when they were receiving care from two staff according to their care contracts. Care plans also described people's relationships with the people in their lives who were important to them. One plan encouraged staff to phone family for any advice and described their understanding of the person's condition. This showed staff tried to encourage positive relationships and manage any triggers to behaviour which could be challenging. The plan went on to show staff how to make bathtime fun for example or how to gently encourage a person to finish an activity. There were also examples of games people liked to play and interact with staff that made them happy. Another person proudly told us how they were able to go to town independently now as staff had helped them understand how to cross the road safely using the same route and staff were also very pleased for the person. This showed staff looked for ways to make each day positive and fun for people who they put at the heart of their care whilst enabling them to be independent and make choices.

The deputy manager told us how important it was to match staff with the people they would be supporting. There was a clear, detailed handover period and the interview process included people who were able to communicate their thoughts on the suitability of interviewees to become support workers. Time was spent with them before staff began supporting them. There would not be a situation where a person receiving care had not met the staff supporting them.

This helped people to build relationships with the staff who supported them and reduce any triggers of behaviour which could be challenging and anxiety for people.

Staff said they were "up for anything". They had supported people to access nightclubs, swimming, sailing and even discreetly support people to build new meaningful relationships. People were treated with respect and dignity at all times. Interactions we saw between people and the staff supporting them were very respectful and friendly.

There were ways for people to express their views about their care. Each person had their care needs reviewed on a regular basis which enabled them to make comments on the care they received and voice their opinions. People told us they felt fully involved in planning their care and care was provided in accordance with their wishes. Some people receiving care were involved in maintaining the agency Facebook page and chairing regular service user forum meetings. Posts included, don't forget its bank holiday and invites to collective social events.

## Is the service responsive?

### Our findings

The service continued to be responsive to people's needs. People told us the service was very flexible and they could live their lives as they wished. Arrow Support Limited was passionate about providing a person centred service. The service liked to be forward thinking and involved people in current affairs and topical events. For example, after a recent national news event around fire safety, the staff worked with people and the fire service. People were able to feel reassured about fire safety as fire officers visited them to check their alarms and discuss fire issues using easy read leaflets. One person had devised a plan of their property showing where fire alarms were as they had chosen not to accept the leaflet. Staff said, "That's their choice." One staff member told us how they made sure local events were available to everyone, offering to pick people up in their own time.

Staff told us they reviewed how activities had gone to see if they could make improvements. For example, one person was asked who they would like to go on holiday with them and this was arranged. Staff swapped their rota to accommodate particular nights out for people to ensure there were smooth arrangements in place. People received monthly newsletter about the service detailing events, changes, new staff and reminders to use sunscreen in hot weather. One newsletter stated, "Staff have stepped up to cover shifts at short notice, this shows the quality and flexibility of our organisation, thank you for all your hard work and support." Staff clearly responded to people's needs and worked with people as their focus making sure they were able to do what they wanted to do. For example, where people were living within a budget staff found enjoyable activities to do. One person commented in the service user forum meeting, "I enjoy the activities and how the support they received was an important part of their life and how this had changed and improved their life."

The service listened to the views of people and staff to make sure the service was responsive to people's individual needs and wishes. For example, staff supervision also included detailed discussions about individuals they were supporting and discussed ways of improving the support. For example, support worker had raised an area of risk and discussed how this could be managed in a way the person liked. There had been no complaints in the last 12 months but people knew how to complain and there was a clear, accessible complaints procedure.

Each person had their needs assessed before they began to use the service. This was to make sure the service was appropriate to meet the person's needs and expectations. The deputy manager showed us how they used a range of sources including health professionals, community support and families to gather as much information about people as possible. A relative said they could not ask for anything more adding, "The service was great."

From the initial assessments care plans were devised to ensure staff had detailed information about how people wanted their care needs to be met. Care plans were extremely personalised to each individual and contained information to assist support workers to provide care in a manner that respected their wishes. Each care plan format was different depending on the person's needs. For example, they could include videos, music and pictures and photos to describe people's care. Information included in the care plan

ranged from the support people needed to meet their physical needs to how they liked their tea.

People were encouraged to maintain their independence as far as possible. Staff told us they trained their care professionals to respect people's abilities and not to take over and do things for them. Staff were pleased when people managed to achieve a new skill.

## Is the service well-led?

### Our findings

The service continues to be well led. There was a registered manager in post who was also the provider. A registered manager is a person who has registered with the Care Quality Commission 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.

The providers mission statement said, "To provide high quality, individualised and modern support service to individuals who require support to live in the community." It described how staff would work as part of a team with the person to provide a streamlined and responsive service. We saw this happening in a very person centred way. The management team promoted these values and visions for the service to make sure the service was person centred and provided a stimulating and enabling environment for people. The vision was communicated to staff through day to day discussions, one to one supervisions and team meetings. Staff were very positive and enthusiastic about the work they did. They all said they loved their job and found it a privilege to work with people enhancing their lives.

The registered manager/provider was well respected by staff and relatives. People told us they were open and approachable and keen to make improvements where necessary. The management team and staff often attended social events with people; even on their days off. Staff enjoyed spending time with the people they supported, promoting real, meaningful relationships within professional boundaries. The management team kept their practice up to date with regular training.

When the registered manager/provider was not available there was an on call system available that ensured the safe running of the service. This meant someone was always available to staff to offer advice or guidance if required. Staff told us they felt very well supported by the registered manager/provider and office team. Staff felt fully involved in the work of the agency and there were ways for them to share their views and make suggestions. The care co-ordinator said, "I often get a text from staff saying 'coffee?'. We meet in the coffee shop downstairs, often with people we are supporting. They call it the "Arrow café". The managers makes you feel part of a team. We have meetings where we problem solve together. Everyone is listened to."

There were robust quality assurance processes in place which included regular audits. All staff received regular spot checks of their work and supervision sessions. Records were kept and issues followed up and discussed in individual supervisions. Where additional training was identified as a need this was put in place.

People could be sure their care plans were kept up to date and reflected their current needs and wishes. All care plans were regularly audited.

To the best of our knowledge the service had notified the Care Quality Commission of all significant events which have occurred in line with their legal responsibilities.