

ECHO Supported Living Services Limited

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## Inspection report

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Date of inspection visit:  
14 October 2021  
18 October 2021

Date of publication:  
08 November 2021

### 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

ECHO Supported Living Services is a supported living service providing personal care. The service is registered to support people with autism and/or a learning disability. Each person has their own individual lease agreement with the housing association and a separate contractual agreement for their support.

At the time of our inspection the service was supporting three people living in their own homes in the Walsall area. The service was providing 24-hour support.

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

Systems were in place to protect people from the risk of abuse and harm. People's support needs were risk assessed and care plans provided staff with the information they needed to manage the identified risk. The provider carried out recruitment checks to ensure staff were suitable for the role.

Staff had the necessary skills to carry out their role. Staff had regular training opportunities and training specific to people's individual needs was provided. There was enough staff on duty to support people. People received their medicines as prescribed. Infection control policies and procedures were in place to keep people safe.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way and in their best interests: the policies and systems in the service supported this practice.

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. There was a strong focus on supporting people to be independent, develop their skills and access their local community. This enabled people who used the service to live as full as life as possible and achieve the best possible outcomes.

People's individual communication needs were considered to support them to be involved in their care. Systems and processes in place promoted a positive culture in the home. Practices at the service were audited to monitor quality of the care people received and areas of improvement were identified.

### Rating at last inspection

This is the first rating of this service. The service was registered with us on 09 January 2020.

### Why we inspected

This was a planned inspection as the service had not previously received a rating.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 ●

# ECHO Supported Living Services Limited

## **Detailed findings**

### Background to this 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was carried out by one inspector.

The inspection began on the 14 October 2021 when we carried out telephone calls to relatives and reviewed records. On the 18 October we visited the providers offices and two supported living houses.

#### Service and service type

This service provides care and support to people living in 'supported living' locations, so 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 meant that 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 the service 48 hours' notice of the inspection. This was because we needed to be sure the provider or registered manager would be in the office to support the inspection and ensure people would be available to speak with us.

#### What we did before inspection

We reviewed information we had received about the service. We sought feedback from the local authority, Healthwatch, CCG and professionals who work with the service. We reviewed the information received 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 this information to plan our inspection.

#### During the inspection

We met and spoke with two people who were using the service and spoke with three relatives about their experience of the care provided. We spoke with 11 members of staff including the registered manager, provider, deputy manager, office manager, senior support workers and support workers.

We reviewed a range of records. This included two people's care records. We looked at two staff files in relation to recruitment. We also looked at a variety of records relating to the management and quality assurance of the service.

# Is the service safe?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- Where risks were identified to people's safety, assessments were in place to guide staff on how to keep people safe. For example, there were behaviour risk assessments in place identifying triggers to behaviour and how staff should respond to support the person and minimise any escalation in behaviour.
- Staff we spoke with knew the risk's to people's safety and how they should address these. Staff had completed training and knew how to support people safely.
- Staff were aware of any health conditions that might impact on people's safety and knew what action to take to mitigate the risk.
- People were supported to take positive risks, this was within a proactive risk management framework that assessed the potential risk and put safeguards in place. This meant people had been supported to grow develop and experience things they wanted to do.
- The provider had systems and processes in place to analyse and respond to any trends in relation to risks that had been identified.
- Each person had a personal emergency evacuation plan in place which explained how they would be supported to evacuate their home in the event of an emergency.

### Systems and processes to safeguard people from the risk of abuse

- Safeguarding systems and processes were in place to protect people from harm or abuse. Staff received safeguarding training and showed a good understanding of safeguarding procedures. Staff told us they were confident any concerns raised would be dealt with by the management team.
- The registered manager was aware of their responsibility to report safeguarding concerns to relevant organisations including the local authority and CQC and they conducted prompt investigations when necessary.
- Systems were in place so learning took place from any safeguarding incidents. For example, safeguarding and any learning from these were discussed with the team in staff meetings. This demonstrated an open and learning culture.

### Staffing and recruitment

- We saw staff were available to support people and to meet their needs safely.
- The registered manager told us the funding hours provided for each person and records confirmed these staffing levels were provided.
- Staff told us there was enough staff to meet people's needs.
- Staff were safely recruited and had all the required checks on their suitability undertaken before they commenced employment.

- A relative told us, "I was involved in the recruitment of staff. There is a good mix of staff and they know [person's name] needs well."

#### Using medicines safely

- People received their medicines on time and in a safe way. Records were maintained to document the administration of medications.
- Staff had received medication training and checks of their competency to administer medicines safely had been completed.
- Regular checks on medicines took place to ensure these had been given as prescribed.

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits in accordance with the current guidance.

#### Learning lessons when things go wrong

- The provider had a system in place to analyse any accidents and incidents so trends were identified and learning from incidents took place.



# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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 received tailored support that was centred around their assessed needs. People's individual needs were assessed before they moved into the service. The information gathered was used to develop the care plan and risk assessments.
- The provider ensured a transition plan was in place prior to the person moving into their new home. This involved staff from Echo supported living working alongside staff in the person's previous care setting. To get to know the person and their unique communication needs.
- Relatives told us they had been fully involved in the initial assessment. A relative said, "I was fully involved throughout the assessment process and I am really pleased with how everything has gone. I was even involved in the recruitment of the staff team and the house has been adapted to meet their [relatives] needs." A staff member told us the transition process included working very closely with people's families. Family members gave a talk to staff and staff could ask questions and get to know and understand people's needs.
- The service was working in line with the underlying principles of Right Support, right care, right culture. For example, people were supported to live meaningful lives and were supported to have choice, control and independence.
- People's care plans were detailed, included characteristics covered by the Equality Act (2010) and regular reviews were completed.

Staff support: induction, training, skills and experience

- Relatives told us staff knew what they were doing and were well trained. A relative told us, "The staff are very good they know and understand [person's name] needs well." Another relative told us, "The staff are very well trained, and understand [person's name] needs well. They [managers] match up the staff very well with [person's name]."
- The provider had systems in place to induct, train and develop staff. A staff member told us, "We do lots of training including training specific to the individual needs of people. The training and support is very good and I feel confident supporting people."

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

- People's care records contained up to date nutrition information for staff to follow.
- People with modified diets had assessments to specify the type of diet they should consume.
- Staff we spoke with knew people's food likes and dislikes and were aware of specific dietary needs and any risks associated with eating and drinking.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People had access to other healthcare services, ensuring a holistic level of support was provided. Care records showed involvement from a range of health care professionals including GP, dentist and optician.
- Staff promoted people's health and well-being and recognised the importance of this. A staff member told us, "We support people holistically. We have seen improvements, for example one person's mobility has improved which has had a positive impact on other aspects of their health needs."
- The registered manager and staff team had been proactive in following up on people's health conditions. For example, a health diagnosis for a person prior to admission to the service was unclear. The registered manager ensured appropriate follow up was requested so the health condition and any treatment needed could be clarified.
- Relatives told us the provider had supported their family member well with ensuring specific health care needs were met.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager was aware of their responsibilities regarding the Deprivation of Liberty Safeguards.
- Staff understood the principles of MCA and how to support people in their best interests. Staff were able to tell us how they asked for people's consent to care.
- Care records contained information in relation to people's capacity. When needed Best Interest meeting had taken place.

# 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

This is the first inspection for this newly registered service. This key question has been rated good. 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

- Relatives spoke highly of their family members care. A relative told us, "They are so much happier with Echo supported Living, they laugh a lot, I think they are living their best life now."
- Staff engaged with people in a respectful and kind manner and at a level and pace that was appropriate for the individual. We observed staff supporting people in a caring way and with patience. For example, we saw staff take time to sit, talk and to listen to people.
- People responded to staff in a positive manner and were relaxed and comfortable in staff's company.
- Staff had received training in Equality and Diversity. The registered manager gave examples of how they had worked to ensure people had equal access to opportunities and were not discriminated against. Staff knew people's history and their likes and dislikes and used this knowledge to support the person.

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

- We observed staff interacting with people and supporting them in a way that allowed them to have control over their lives. For example, one person had been supported by staff to attend an appointment. They then wanted to relax and watch a television programme and were supported to do this.
- Some people did not always verbalise their needs and wishes. We saw staff understood how people expressed their needs and understood their unique communication and were able to respond appropriately.
- Relatives told us they were fully involved in their family members care. A relative told us, "[Person's name] is so well looked after and staff support [name] to do all the things they like to do."

Respecting and promoting people's privacy, dignity and independence

- The registered manager had high expectations for people' and this was reflected in how people were supported to develop their independence and make choices about their lives.
- People were relaxed around staff and we observed positive interactions between people and staff members.
- Staff told us they enjoyed working with the people they supported and understood their care and support needs. A staff member told us, "I know we are a new company, I feel we go above and beyond in how we support people with very complex needs. I can see the progress people are making. [Person's name] goes to the local shop now and people will say hello to them and know their name, they are living as part of the community now."
- Relatives told us their loved ones were treated with dignity and respect.

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

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

- People were supported by staff who knew and understood their needs. Our observations supported that staff had built good relationships with people and knew their likes and dislikes.
- People had good links with family and staff supported people to maintain this.
- Staff respected people's individuality and diversity and were aware of people's personal preferences.
- A relative told us, "I am so pleased with [person's name] care, everything is at their own pace and is personalised."
- A person's care plan stated they liked a quiet and a low stimulus environment. When we visited their service we found this was provided and their care plan was being followed.
- People's care plans were developed with the person or their representative and provided staff with a detailed record of what individualised care meant to the person.

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 was aware of the AIS standards and people's specific communication needs were detailed in their care records.
- Staff communicated effectively with people. For example, giving people as much time as needed. Staff also understood the importance of what they said to people and how. For example, for one person staff explained and their care plan stated it was important that staff explained what they were doing and why. We saw staff did this and this provided the person with reassurance and minimised the person's anxiety.
- Information was available in different formats, for example, easy read.
- In the providers PIR they told us they had completed an Accessible Information Standard gap analysis and had an action plan in place to ensure that all standards are met. They told us people's communication needs were fully assessed prior to moving to the service. Records we saw confirmed this.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported in a very person – centred way to live their lives and do the things they enjoyed doing in a way and at a pace that suited them.
- We observed people taking in part in activities and engage in them. One person was supported to do a

handheld activity. Another person told us about trips out they had enjoyed including the cinema and seaside.

- Staff told us about how they had supported people to take part in activities that the person wanted to do and ongoing work on this was taking place. They told us they had supported people to be part of their local community and access local facilities including shops and hairdressers.

- Relatives spoke highly of the good communication between the service and themselves. They were positive about the opportunities their family member were supported to do.

Improving care quality in response to complaints or concerns

- The provider had policies in place to respond to concerns or complaints.

- Compliments were used to identify what worked well.

- Relatives told us they were happy with all aspects of the service. They told us they would be confident speaking with the registered manager if there was something they were not happy about. However, they had not needed to do this.

End of life care

- No one was receiving end of life care when we inspected. The provider had policies and procedures in place to support this need.

# 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-centered care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated 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 requirement

- The management team and provider were clear about their roles and were committed to providing a high-quality service for people.
- Audit systems were in place to monitor the standard of support people received.
- The systems in place ensured the registered manager and provider had oversight of the quality and safety of the service.
- Staff told us they felt well supported by the registered manager and the provider. Staff told us they were clear about their responsibilities and also received positive feedback when things went well.
- We identified some minor issues during the inspection, and these were acted on immediately by the management team. For example, a handwritten MAR sheet had not been checked and signed by a staff member. This was immediately addressed, and the registered manager ensured checking for this was implemented into their weekly medicine audit.

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

- The registered manager and staff demonstrated a commitment to people and they displayed strong person-centred values.
- Staff knew people and their needs well and they told us they felt supported in their role. Staff could tell us about the improvements people had made since moving to the service and they were looking to explore with people how they could support them to enhance their lives further.
- Staff meetings were held and detailed records of the meeting were available.
- A relative told us, "I couldn't think of anything they could do better." Another relative told us, "The managers are brilliant, they are approachable and keep me fully informed."
- A social care professional told us the registered manager and staff had a very good understanding of the needs of people. They told us the quality of care provided is very good.
- Staff satisfaction and professional surveys had been completed and the results of these were recorded and shared. They showed positive comments had been received and any improvements identified and acted on. For example, staff have feedback that an improvement would be to email staff the minutes of staff meetings and this had been actioned.

How the provider understands and acts on the duty of candor, which is their legal responsibility to be open

and honest with people when something goes wrong

- The provider had notified us, as legally required of significant incidents which had happened in the home. The management team told us they understood their responsibility to be open and honest when things go wrong.
- There was a strong emphasis during the inspection on communicating and sharing information in an open and transparent way.
- The registered manager monitored the culture of the service and staff team by various means including providing direct care at times and working alongside staff, unannounced spot checks of the service including night visits, and formal meetings.

Continuous learning and improving care

- Audits and monitoring systems had been used effectively to drive improvements.
- The registered manager kept up to date with current practice and changes in legislation. People's care records, where appropriate, referred to good practice and legislation and had links to NICE guidance. [NICE is the national institute for health and care excellence. They set at the care and services most suitable for people with a specific condition or need].

Working in partnership with others;

- The service worked with a wide range of stakeholders involved in people's care. These included commissioners, local authority complex team and social workers.
- All the feedback we received was very positive about how well the provider has worked with the stakeholders. One professional told us, "Echo supported living services work very well with us and they always have the person's best interest at heart."