

Leading Lives Limited

# Central Supported Housing and Domiciliary

## Inspection report

Stowmarket Community Hub  
Crown Street  
Stowmarket  
Suffolk  
IP14 1HY

Date of inspection visit:  
28 February 2019

Date of publication:  
21 March 2019

### 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:

This service provides care and support to people living in 'supported living' settings, so that they can live in their own home 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. At the time of our inspection 11 people were using the service.

People's experience of using this service:

People received a consistently good service and felt safe with the support they received from the staff.

People's medicines were being managed safely by staff trained to administer medicines.

Staff knew people well and provided support to them in the way they wished. People's individual needs and preferences were recorded and understood by the staff. Support was provided which ensured people received nutritious food and drinks of their choice.

Staff were supported through planned training, supervision and a yearly appraisal.

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

People were involved in decisions about their care and staff sought appropriate consent and asked people what help they needed. People received care that respected their privacy and dignity as well as promoting their independence wherever possible.

Each person had an individual care plan including an assessment of their needs, risk assessment and detailed information about how to achieve agreed goals.

The service had a complains policy which had been designed so that it could be understood and used by the people using the service.

The service was well-led by a dedicated management team who demonstrated understanding and commitment to the needs of the people who used the service.

Senior staff carried audits of the support provided and sought the views of the people using the service through surveys.

Rating at last inspection: At our last inspection on 10 June 2016 the service was rated Good. The report was published on 19 August 2016.

Why we inspected: We inspected the service as part of our inspection schedule methodology for 'Good'

rated services.

## 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 effective?

Good ●

The service was effective

Details are in our Effective findings below.

### Is the service caring?

Good ●

The service was caring

Details are in our Caring findings below.

### Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below.

### Is the service well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below.

# Central Supported Housing and Domiciliary

## **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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

The inspection was completed by one inspector.

#### Service and service type:

Central Supported Housing and Domiciliary service provides care and support to people living in 'supported living' settings, so that they can live in their own home 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 two managers registered with the Care Quality Commission. 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.

#### Notice of inspection:

We gave the service 48 hours' notice of the inspection visit because it is small and the managers are often out of the office supporting staff or providing care. We needed to be sure that they would be in. Inspection site visit activity took place on Thursday 28 February 2019.

#### What we did:

We reviewed information we had received about the service. This included details about incidents the provider must notify us about and we sought feedback from the local authority and health professionals

who worked with the service. We used information the provider sent to us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

We visited the service office on 28 February 2019 and spoke with the registered managers and three members of staff; and to review three people's care records, policies and procedures. We also spoke with one person using the service who came to see us at the service office and we visited two people in their own homes, spoke with two relatives and a further two members of care staff.

# Is the service safe?

## Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

At our last inspection in June 2016 we rated this key question as 'Good.' At this inspection we found people continued to be kept safe.

Systems and processes to safeguard people from the risk of abuse

- The service had a safeguarding policy and procedure in place. People continued to be supported by staff who understood safeguarding, what to look for and how to report concerns. One member of staff told us, "We have training in safeguarding every year."
- Members of staff were aware of their responsibility to report concerns to the relevant external agencies.
- People we spoke with told us they felt safe. One person told us, "I feel very safe because the staff know me very well and are nice people." A relative told us, "I feel highly confident in the staff."

Assessing risk, safety monitoring and management

- The service had a system to record and analyse any accidents or incidents. This helped to identify any trends or themes.
- The service assessed risks to people's safety and well-being. Plans were put in place to mitigate these risks and staff were familiar with them. This included risks associated with health conditions, travelling, nutrition and personal finances.

Staffing and recruitment

- The service had robust recruitment practices in place. New staff were appointed only after checks were completed which ensured they were of good character to work with people who had care and support needs.
- There were enough staff to meet people's assessed needs consistently. People had developed a positive relationship with care staff who knew them well. This supported people to feel safe.

Using medicines safely

- Records showed people received their medicines as prescribed.
- When people were prescribed medicines on a when-required basis, there was written information available to show staff how and when to give them to people to ensure they were given consistently and appropriately.
- Competency assessments were completed for all staff. Senior staff observed staff in practice which helped to ensure they were safe to give prescribed medicines to people.

Preventing and controlling infection

- Staff had received training in infection control and had access to protective personal equipment such as

disposable gloves and aprons as required.

- People who used the service and relatives told us staff practiced good infection control measures.

Learning lessons when things go wrong

- Lessons were learned when things went wrong. The senior staff held regular meetings and implemented actions as necessary to improve the service and to keep people safe.



# 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

Good: People's outcomes were consistently good, and people's feedback confirmed this.

At our last inspection in June 2016 we rated this key question as 'Good.' At this inspection, we found that people continued to receive an effective service.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs continued to be assessed before they started to receive support from the service. Information collected included people's needs, preferences and personal histories.

- The service supported people flexibly to meet people's their needs. One person told us, "I have lots of choices."

Staff support: induction, training, skills and experience

- People were supported by staff who had received training for their roles. Staff told us they had access to a range of training which fully equipped them for their role. A relative of one person told us, "The staff are very knowledgeable."

- Staff undertook training and received support from experienced members of staff before working on their own. Staff completed the Care Certificate, a nationally recognised qualification for staff new to working in care.

- Staff told us they felt well-supported. They received regular supervision and an appraisal. One member of staff told us, "Supervision is planned in advance and I find it supportive."

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

- The staff had worked with people to identify their choices and healthy options.

- One person told us, "I never go hungry."

Staff working with other agencies to provide consistent, effective, timely care

- The staff worked with people using the service to arrange appointments with other professionals to support the person's well-being. Information regarding appointments were recorded in the person's care plan.

Supporting people to live healthier lives, access healthcare services and support

- Staff worked with professionals to ensure people were supported to access health services and had their health care needs met. Staff followed guidance provided by these professionals which was explained to the person using the service.

- Relatives told us that healthcare support was arranged as necessary and the information recorded.

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

- The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf

of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. We checked that 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 managers explained to us how they made an application for a DoLS and the reasons why this had been necessary.

# 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

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

At our last inspection in June 2016, we rated this key question as 'Good'. At this inspection we found that people continued to receive a caring service.

Ensuring people are well treated and supported; respecting equality and diversity

- People felt staff treated them with understanding. One person told us, "The staff have helped me with many things."
- People felt they mattered and that staff had time for them. One person told us, "The staff take time to go out with me when I need them to."
- Relatives told us that the staff had enough time to care for their relatives.

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

- People informed us that they were offered choices and staff listened to them.
- A relative told us, "Something I like is the staff approach and values and supporting [my relative] to have the chance to express themselves."

Respecting and promoting people's privacy, dignity and independence

- People's privacy was respected because confidential information was held securely in the office location.
- People were treated with compassion by knowledgeable staff who respected people by addressing them with the name they wished to be called.
- The staff promoted people's independence by discussing options with them and supporting the choices they made.

# Is the service responsive?

## Our findings

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

Good: People's needs were met through good organisation and delivery.

At our last inspection in June 2016, we rated this key question as 'Good.' At this inspection we found that people continued to receive a responsive service.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People continued to receive a service that was person-centred because the staff responded to their individual needs and preferences. People and their relatives as necessary were involved in the planning and review of their care.
- Prior to joining the service an assessment was carried out to determine if the staff could meet the person's needs.
- The service provided consistent staff which helped to develop positive relationships between the people using the service and staff members. One person told us, "I know all of the staff very well."
- A member of staff told us, "Should a person have increased needs we can work quickly and provide additional support."
- Information was available in the event of a medical emergency within the person's care plan to share with other professionals to help them understand how best to communicate with the person.

Improving care quality in response to complaints or concerns

- The service had a complaints policy and procedure.
- Information about how to raise a complaint was given to people. People using the service had helped to develop this and included a pictorial format.
- People felt able to raise concerns if they wished to and none of the people we spoke with as part of this inspection said they had raised any formal complaints.

End of life care and support

- The registered managers informed us that some people using the service did not wish at present to discuss end of life care planning and support. For those that did plans were discussed and recorded.
- People would be supported to remain with the service in their own home and supported by staff who knew them well. The senior staff of the service planned to work with other professionals to support people appropriately at that time in their life.

# 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

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection in June 2016, we rated this key question as 'Good.' At this inspection we found that the service continued to be well-led.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The service had a statement of purpose to explain to everyone the aims and objectives of the service.
- The service was led by experienced managers who were in regular contact with the people using the service and actively supported the care staff in their roles.
- People and their relatives told us they were happy with the way the service was organised and delivered. One relative told us, "Very good communication between us the and service."

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

- The service was well-organised and there was a clear staffing structure. The staffing rota was organised well in advance. One person told us, "I always know which staff is coming."
- Staff understood their roles and responsibilities and found the management team supportive.
- Staff felt valued and well-supported by the management team because they were available to support at anytime from the on-call process.

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

- People and their relatives told us they were encouraged to comment on the care delivered to them. A relative told us, "We are involved and frequently asked for our feedback."
- Staff spoke positively about the support they received from the management team. They told us senior staff worked alongside them and were available for advice and support.

Continuous learning and improving care

- The management team supported a culture of continuous learning and improvement. Staff informed us that the managers were supportive of training requests and open to new ideas.
- The management team positively encouraged feedback, reviewed the quality of the service and acted on any identified shortfalls to continuously improve the service.
- The service acted upon the results of surveys to develop and improve the service.

Working in partnership with others

- The service worked professionally with other agencies such as the local authority.
- The service worked with other key organisations to support care provision and joined-up care. This included people who used the service, their families and representatives, GPs, community nursing teams and other health care professionals.