

Origin Housing Limited

# London Supported Living Services

## 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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

London Supported Living Service is a service that provides personal care to people in their own home. The service provides support to those with learning disabilities and autistic people. At the time of our visit the service was providing regulated activity to 1 person.

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

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

**Right Support:** People who used the service were protected from abuse and harm, the registered manager openly discussed amongst the staff team when things went wrong, highlighted what they had learnt and used this to make improvements. There were systems in place to help ensure the risks to people were as low as possible.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service <supported/ did not support> this practice.

**Right Care:** Relatives told us staff were kind and caring and they felt they were listened to. People's rights to dignity privacy and independence were promoted and respected. One relative told us, "My [relative] is very happy with [their] support from [care worker], it couldn't have worked out better and [they feel] safe and comfortable when being supported."

People received care that was responsive to their needs and preferences. Relatives were confident that concerns they raised would be dealt with appropriately.

**Right Culture:** The registered manager had processes in place to monitor and review the quality of the service. For example, audits of care records. Feedback was sought from people using the service and relatives. This was used to drive forwards improvements and to learn lessons. Relatives and staff were positive about the management of the service.

People had confidence in the ability of the staff to provide effective care. Staff received ongoing training to ensure their skills and knowledge remained up to date. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best

interests; the policies and systems in the service supported this practice.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (published August 2013). From 2016 until November 2022 the service did not provide the regulated activity to anyone, so we did not need to inspect them. At this inspection the rating has remained the same.

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

#### 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

### Is the service effective?

Good ●

The service was effective

### Is the service caring?

Good ●

The service was caring

### Is the service responsive?

Good ●

The service was responsive

### Is the service well-led?

Good ●

The service was well-led

# London Supported Living Services

## **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 was carried out by 1 inspector.

#### Service and service type

This service provides care and support to people living in 4 'supported living' settings, so that 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.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

During our inspection we spoke with the registered manager, team leader, a support worker and 1 relative. We looked at 1 person's care records and 1 staff file as well as other records relating to the management 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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There were systems in place to help safeguard people from the risk of abuse. Care workers could recognise and report abuse and understood their responsibilities.
- One care worker said, "I would raise any concerns I had to my manager, this would then be raised to the safeguarding lead in the organisation. There would be an investigation and contact made with the local authority safeguarding team."
- Care workers had updated safeguarding training, the registered manager attended regular safeguarding forums and the safeguarding policy was up to date and relevant.

Assessing risk, safety monitoring and management

- Risks were managed appropriately to make sure people were safe.
- Risks to people were assessed prior to starting the service this was part of the initial assessment carried out by the registered manager.
- Risk assessments covered essential areas connected to people's health and wellbeing. These plans identified potential risks to people's safety and provided guidance on the action care workers needed to take to lower the risk.
- When people's needs changed, the assessments in their care plans were updated to reflect this.

Staffing and recruitment

- Care workers were recruited safely. All necessary pre-employment checks were completed before care workers started working with people.
- The registered manager told us they had an internal bank of staff to cover for care workers when they were absent for any reasons.
- There were enough care workers deployed to support people. During the inspection staffing levels matched the rota.

Using medicines safely

- The registered manager had introduced medicines training for care workers. This was in case the needs of people changed or for future people being referred to the service needing support with taking their medicines.
- People who were being supported did not need help with their medicines, their relatives supported them with this.
- There was an up-to-date medicines policy in place.

### Preventing and controlling infection

- The service used effective infection, prevention and control measures to keep people safe.
- We were assured that the provider was using personal protective equipment (PPE), such as gloves and masks, effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider's infection prevention and control policy was up to date.

### Learning lessons when things go wrong

- There were systems in place to learn when things went wrong. Accidents and incidents were appropriately recorded on an electronic system and reviewed by the registered manager on a monthly and quarterly basis.
- Debriefs took place following incidents to identify any improvements and support to people's wellbeing. These were recorded in the system.
- The registered manager told us that if there was a concern there would be an investigation and an action plan put in place that would be monitored.



# 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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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's needs were assessed before they were offered a service.
- The registered manager carried out assessments of people's needs and preferences in relation to their care before commencing their support.
- People had care and support plans that were personalised and reflected their needs and aspirations.
- There were clear pathways to future goals and aspirations, including teaching skills, in people's support plans.
- Initial assessments identified what the person needed support with and how they wanted to be supported.

Staff support: induction, training, skills and experience

- People were supported by care workers who had received relevant and good quality training.
- One relative told us, "The staff are very knowledgeable, experienced and know what they are doing."
- Care workers completed the Care Certificate which formulated part of the induction. The Care certificate is a method of inducting care staff in the fundamental skills and knowledge expected within a care environment.
- There was a training plan in place. Care workers had completed all the mandatory training. Systems in place automatically alerted both care worker and managers when training needed to be renewed.

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

- People who required support to eat and drink received the support they needed.
- Care workers supported people to be involved in preparing and cooking their own meals in their preferred way.
- Care plans included information about people's dietary needs, and how to support them with preparing meals and snacks. One relative told us, "Staff prompt [relative], to make drinks, sandwiches and microwave meals."

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

- People had health action plans in place which would be used by health and social care professionals to support them in the way they needed.
- The registered manager told us that, if needed, they would work closely with external professionals and

health care professionals. At the time of the inspection, people's relatives managed this aspect of their care,

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 MCA 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 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

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- One relative was redirected to a carers forum to gain more information about what to do to support their family member who did not have capacity to make decisions in certain aspects of their daily living.

# 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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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

- People were looked after by care workers who knew them well. They were caring, and people's diverse needs were acknowledged and catered for.
- One relative told us, "Staff are caring and know [my family member] really well, they take time to talk to him and talk about the things he wants to talk about."
- There was clear, person centred information in people's care plans. This included their likes, dislikes and cultural beliefs. The information guided staff how to support people in the way they chose to be supported.
- Care workers attended training on equality and diversity awareness.

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

- People were supported by care workers to be involved in all aspects of their care. Relatives were also fully involved.
- People and their relatives were encouraged to provide feedback to the service about the care they received.
- The registered manager had a programme of visits to people and their relatives. One relative told us, "My [relative] is involved in everything [they] do and has a say in [their] support and is listened to."

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect and their independence was promoted. Care workers encouraged people to do what they could for themselves.
- One care worker told us, "[The person], is in control and [they] get into the shower on [their] own, [they] can do a lot for [themselves], I just help with washing [their] hair and applying moisturiser to [their] skin."
- The information in people's care plans guided care workers about how to support people to be as independent as possible. This included reference to what people were able to do for themselves and how they liked to be supported within the allocated times.

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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 received personalised care which met their needs and preferences. Their care plans were personalised to meet their needs.
- Preferences, for example their preferred gender of care worker, were identified and appropriate care workers were available to support people.
- One relative explained the provider had responded to the person's requests for the gender of their care worker to be changed. This had resulted in the person being happier.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager ensured people had access to information in formats they could understand, and this included their care plans.
- Care workers had a good awareness and understanding of people's individual communication needs.
- The provider had communication profiles in place for the people they supported, which enabled care staff to understand people's different communication styles.

Improving care quality in response to complaints or concerns

- There was a complaints policy in place which explained what people could expect if they raised a complaint with the service.
- People and their relatives knew how to raise a complaint. Although at the time of our inspection, there had not been any complaints made to the service.
- Relatives and care workers told us they felt confident they would be listened to if they did complain.

# 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 good. At this inspection the rating for this 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.

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

- People who used the service were central to the values and visions of the registered manager and provider. People were involved in decisions about their care needs and their views and opinions mattered and were valued.
- Care workers told us they enjoyed working at the service. Relatives and care workers were positive about the registered manager and team leader and their influence in promoting an open culture with positive staff morale.
- The quality of care people received and the positive outcomes that came from the good care, stemmed from the ethos and management style of the provider and registered manager.

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 registered manager understood their roles and responsibilities relating to the duty of candour.
- Since the previous inspection there had been no incidents that had occurred and would require a duty of candour response.

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

- The registered manager had a comprehensive understanding of what was happening in the service. They knew about the care and support needs of people using the service and how care staff were meeting those needs.
- The registered manager had a system to monitor and assess the service provided to people. This enabled the registered manager to identify any shortfalls and address them. At the time of the inspection the registered manager was further developing people's care records to ensure they were person centred.
- The team leader who reported to the registered manager undertook support visits. This enabled them to receive comments about the care from people and work alongside care workers and identify if improvements were needed.
- Care workers had regular individual meetings with managers to identify if improvements were needed in their practice or knowledge.

Continuous learning and improving care

- There were effective systems to monitor and improve the quality of the service. The registered manager told us they continued to develop care records to be person centred and outcome focused. They told us this would enable them to evidence in a clearer way the support and outcomes they support people to achieve.
- Care workers received training in meeting people's specific needs, and this was updated where required to ensure care workers received the most up to date information. The registered manager identified where further training was required and had booked training specific to people's needs.

#### Working in partnership with others

- At the time of the inspection, relatives liaised with the different health and social care professionals. However, the registered manager told us that they would also be able to offer support in this area.
- The registered manager told us they had a good relationship with the commissioners of the service which had been established for a number of years.
- The registered manager kept up to date with health and social care by attending forums and networks of other registered managers where they share ideas and information about good practice.