

Herts & Essex Independence at Home Ltd

Herts & Essex Independence at Home Ltd Office

Inspection report

5 Ross Close
Saffron Walden
Essex
CB11 4AY

Tel: 07515378404

Date of inspection visit:
13 April 2018
16 April 2018

Date of publication:
04 June 2018

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

Herts and Essex independence at home was inspected on 13 and 16 April 2018 and the inspection was announced. A previous inspection was undertaken in May 2016 and the service was rated good. At this inspection we found that the service had retained its overall good rating and had continued to develop in specific areas and as a result we have rated caring as outstanding.

Herts and Essex independence at home provides care and support to people living in specialist housing. The accommodation is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate the premises; this inspection looked at people's personal care and support service.

People using this service lived in two ordinary flats and one house shared by four people. The properties were all located in the Bishops Stortford areas. As part of the inspection we visited the main office which was located in Saffron Walden and two of the properties where people were supported. In total the service supported six people with a learning disability.

The service had a registered manager. 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 care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. A key principle is that people with learning disabilities and autism can live as ordinary a life as any citizen.

People spoke highly of the service and the quality of care they received. Relatives echoed this and told us that they would not hesitate to recommend the service to others.

People were assisted to develop their skills and live their life as independently as possible. They were empowered to have a voice and realise their potential. They were supported to work and had good access to their local community enabling them to lead a full and interesting life.

Staff were clear about their responsibilities and the values that underpinned their work. Care was person centred and focussed on the needs of the individual. People's needs were regularly reviewed and they were supported by a consistent staff team who knew them well. Staff had excellent relationships with people and their relatives. Any concerns or issues were addressed in an open and transparent way. Staff had access to regular training opportunities to ensure that their skills and knowledge was kept up to date.

There were sufficient numbers of staff who were used flexibly to meet people's individual needs.

Recruitment procedures had been strengthened since the last inspection and were well organised, providing safeguards to people.

Staff were clear about the actions they needed to take to protect people and manage the risks associated with their care. The staff worked alongside a number of professionals to promote peoples wellbeing. People were supported with their nutrition and medicines. Staff were trained in medicine administration and regular audits were undertaken to identify shortfalls and learning.

The manager was approachable and staff were motivated and enabled to contribute to the service development. There was a quality assurance system in place to drive forward continuous improvement.

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

Staff were clear about the processes to follow if they had a concern

Risks to individuals were identified and management plans put into place to reduce the likelihood of harm.

Recruitment procedures were in place which offered protection to people.

People were supported by sufficient numbers of staff who worked in a flexible way to meet their needs.

Medicines were safely managed.

Is the service effective?

Good ●

The service was effective.

People were supported by experienced and knowledgeable staff who had been inducted into the role.

Staff had a good awareness of the principles of consent.

People were supported to eat healthy, nutritious food and to access health care when they needed to.

Is the service caring?

Outstanding ☆

The service was extremely caring.

There was a strong person centred culture in the service. The principles of independence, dignity and choice underpinned the delivery of care.

People had control over their lives and were enabled to be as independent as they could be.

Staff knew the people they were supporting extremely well and enabled them to contribute to the delivery of the service and

make their views known. Staff had excellent relationships with the people using the service and their relatives. Staff were highly motivated and took pride in people's achievements.

Is the service responsive?

Good ●

The service was responsive.

People's needs were assessed and reviewed. Staff knew individuals, their history and their care preferences.

People were supported to be part of the community and lead interesting and fulfilling lives.

There were clear systems in place for the management of complaints.

Is the service well-led?

Good ●

The service was well led.

Staff told us that the management of the service were helpful and approachable.

There was a clear vision and a set of values.

There were systems in place to reflect on practice and drive improvement

Herts & Essex Independence at Home Ltd Office

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 was planned to check 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.

The inspection was announced and took place on 13 and 16 April 2018. The provider was given 24 hours' notice because the location provides a supported living service and we needed to be sure that people would be available when we visited.

The inspection team consisted of one inspector.

Prior to our inspection we reviewed information we held about the service, in particular notifications about incidents, accidents and safeguarding information. A notification is information about important events which the service is required to send us by law. Prior to the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give key information about the service, what the service does well and improvements they plan to make.

We spoke with four people who used the service and three relatives. We interviewed three staff, a director and the registered manager.

We reviewed two support plans, recruitment files, and records relating to the quality and safety monitoring of the service.

Is the service safe?

Our findings

At the last inspection this key question was rated as 'requires improvement' as we found the recruitment systems for staff were not working effectively. At this inspection we found that this had been addressed.

Staff continued to safeguard people from avoidable harm. Staff had received training in safeguarding adults. They were knowledgeable about the process to follow if they had concerns. The registered manager was aware of how to report to the local authority safeguarding team and whistleblowing procedures were in place if required. Staff supported some individuals with purchasing items and there were clear oversight arrangements in place which provided people with some protection from financial abuse.

Risks to people's safety and health were assessed, managed and reviewed. People's records provided staff with information about any identified risks and the action they needed to take to keep people safe. There were risk assessments in place for areas such as road safety, nutrition and behaviour that challenges. Risk assessments for specific behaviours included what might trigger the behaviour and guidance for staff in how they should respond. Staff were knowledgeable about people's needs and the actions that they should take to reduce the likelihood of harm to individuals.

The staff described how they supported people with their property to ensure it was safe. For example they told us that they checked the fridge temperatures and checks had been undertaken on the smoke alarms to ensure that they were working effectively.

Records were maintained of incidents and accidents and we were told that debriefs took place to reflect on what happened. All incidents were recorded centrally and reviewed by the registered manager to identify any triggers and patterns which would be used for staff development and learning.

People told us that there was sufficient numbers of staff to support them. The service was fully staffed and had a stable staff team, some staff having worked with individuals for many years. The provider told us that they had a low staff turnover and they had not used any agency staff as it was important that people were supported by staff who knew them well

There were clear recruitment procedures in place which meant that checks on people's suitability were undertaken before they were employed by the service. Evidence of completed application forms were seen along with interviews notes and references from previous roles. Records confirmed that checks were undertaken on people's identity and Disclosure and Barring Service (DBS) checks undertaken. The DBS helps employers make safer recruitment decisions and makes checks on any criminal convictions and these were repeated on a three yearly basis. Checks were undertaken on staff who provided transport which included checks on their driving licence and car insurance details.

People's medicines were managed safely. Staff who administered medication told us that they had undertaken training on medication administration and checks were undertaken to ascertain staffs understanding and competency. We checked the medication administration charts and a sample of

medication and saw that they tallied. We saw that medication was securely stored and staff told us that medication was checked on a weekly basis. We were shown copies of medication audits that were undertaken to check on medication and ensure that it was being stored and administered as prescribed.

Staff supported people with cooking and we saw that they had undertaken training on food hygiene and infection control. People were supported to check fridge temperatures and reminders were in place such a home-made poster entitled, 'Be safe in the kitchen.'

Is the service effective?

Our findings

At this inspection, we found staff had the same level of skills, experience and support to enable them to effectively meet people's needs as we found at the previous inspection. People continued to have freedom of choice and were supported, where appropriate with their health and dietary needs.

People were supported by a stable staff team and there had been little staff change since our last inspection. The small number of new staff who had been employed, had access to induction training including support in working towards the Care Certificate. This is a nationally recognised, good practice induction for newly employed staff working within the care profession. New staff 'shadowed' more experienced staff to support them in getting to know the care and support needs of people and to gain confidence in their role.

From training records we saw the majority of staff were up to date with the provider's mandatory training and had completed additional courses in relation to people's specific needs. This included epilepsy, autism and supporting people who displayed behaviours which challenged.

Staff told us and records we reviewed showed us that staff had been supported through regular one to one supervision sessions, staff meetings and appraisals. Minutes of staff meetings showed us that staff were involved in reviewing people's support needs as well as discussions on good practice and what they could improve on.

People had good access to healthcare and were supported to lead healthier lives. Care and support plans included details of how to support people with their health care needs. For example people diagnosed with epilepsy had a clear support plan to help guide staff in how to respond to and keep individuals safe. People attended the opticians and dentists on a regular basis. Care plans gave details of appointments and outcomes.

The Mental Capacity Act (MCA) 2005 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 people lack mental capacity to make particular decisions, any decisions made on their behalf must be in their best interests and as least restrictive as possible. We found that care plans had been developed with the person and their family and outlined their wishes. People told us that they were in control of their care and enabled to make decisions about how they wanted to live their life. Staff had undertaken training on the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DOLS) and those spoken with had a good understanding of the principles of the legislation.

People were supported to maintain a healthy lifestyle and staff supported people with shopping, preparation and cooking of meals. People were supported to prepare meals from scratch; one person told us for example that the burgers on the menu were homemade. People told us that their choices were respected and one person showed us the cards they had made to help people decide on the menu and what

they would like to eat.

Is the service caring?

Our findings

At the last inspection this key question was rated as 'good'. At this inspection we found that the service had continued to develop this area and we have judged the rating is 'Outstanding'.

There was a strong person centred culture which underpinned how the service worked. Staff described how the principles of choice, dignity and respect were reflected in their day to day work. For example in how they communicated with people and the steps that they took to support people to make choices. Staff worked hard to empower people to communicate and contribute to daily life, the service as well as the inspection process. For example, a member of staff noted that one person needed additional support when they were talking to us; they offered to help the individual and helped them say what they needed to. For another person they told us about them and what they were interested in to help us engage with the person about their experience of using the service.

There was accurate and detailed information in people's care records about them as individuals and how they liked to be supported. We observed people being actively encouraged to contribute to daily life and decision making. Staff worked in a person centred way in line with people support needs. They were observed to be sensitive and kind, and working at the individuals pace. One member of staff told us, "[Name of person] goes to church but for other people is it not so important." Staff knew how to work effectively with individuals, for example one member of staff told us, "We know what [the person] likes we give a couple of choices but don't want to overwhelm them."

We observed that people were treated with dignity and had control over their lives. For example people opened the door, showed us round and offered and made the drinks. People lives were very different reflecting their interests and things that were important to them. They were at the centre of the service and had good access a wide range of interesting and fulfilling activities. The majority of activities were specific to the individual but on the day of the inspection a number of people had been to their local gym with staff and then out for lunch. They returned full of enthusiasm and energy and all shared a joke together about being healthy and exercising but then eating a large meal in the local pub.

The feedback from people using the service and relatives was consistently positive. One person told us, I really like it here, they do a good job. ..You can do what you want to do." All the relatives we spoke with told us that the staff knew their relative well and worked at their pace. They all felt able to recommend the service and used terms such as "It's unbelievably good". One relative told us, "We are extremely lucky, it is everything we wanted for [our relative].the care team are like an extended family. There is fantastic support." Another person told us, "To see how [my relative] is now is a testament to all the staff who have worked with them."

Staff were highly motivated and clearly enjoyed working with the individuals who used the service. They spoke proudly about their role and the achievements that individuals had made. They told us that one person had been, "Transformed and their life turned round" because they were now able to access the community and were becoming more and more independent. These changes were reflected in the

individual's records and their relative told us, "My relative is so happy, they do what they want to do and they are increasing their skills." They told us how they had seen them progress since moving into the service and how they now did small tasks such as cleaning up without prompting. Staff told us about another individual who had recently won an award for achievements at their work placement and how they had been to the award ceremony with a relative.

All the staff we spoke with had knowledge of people's personal histories, likes and dislikes. Some of the staff had worked with some individuals for many years and seen them develop and become more independent and self-assured. Because they knew people so well, we saw that they noted changes in people and their wellbeing and advocated for them to ensure that their needs were effectively addressed. One person for example was described as 'not being themselves' and they were not progressing as previously. We saw that staff had identified this and liaised with the individual's local authority, as a result it was agreed that the individuals support hours should be increased. We saw that these hours were being used creatively and allowed the person to plan and be accompanied on trips of their choice to London and wider afield. The individual told us about the activities that they had undertaken and how much they had enjoyed them. Staff told us that this had been a real success and had significantly increased this individuals overall wellbeing and confidence.

People had excellent relationships with the staff who supported them. They were at ease and looked relaxed and happy. We observed lots of laughter and good humoured interactions. We saw that staff took a genuine interest in people's individual interests and things that were important to them. There were lots of banter and discussions about music, football and cooking. One person told us that they, the staff and their family all had a football league together, which involved lots of organisation and from which they clearly got a lot of pleasure. One relative told us that the staff team worked effectively as a whole as they had different skills which complimented each other, some providing more emotional support to their relative and others more activity and direction.

People told us that they were happy and they liked the staff as they got on well together. One person spoke warmly about a staff member and described them as a "Legend." We saw that one social care professional had written. 'It's been an absolute pleasure to work alongside you all, I'm so impressed with how (Individual) has been supported both emotionally and practically by the team and the level of opportunities they have had to lead an independent life. The team continues to be exceptional and a shining example of how supported living can work at its best.'

People had contact with family and friends and these relationships were fully supported and enabled. People's loved ones were able to visit when they wanted and there were no restrictions on this. There were clear arrangements in place for advocacy if required. People had good social networks and since the last inspection the service had worked with other local organisations to develop this further. The registered manager told us they had developed relationships with other services and as a result new friendships have been made and individuals had been supported to visit their friends in their home, receive guests, attend parties and other social occasions.

Is the service responsive?

Our findings

At this inspection, we found people continued to receive responsive care, which was personalised according to their assessed needs and preferences.

Comprehensive assessments were undertaken before people began to use the service and this information was used to develop a detailed and person centred care plan which guided staff on how best to support people and details of their care preferences. One person's care plan documented the fact that the person liked to have things planned well ahead and told staff that the individual was more likely to respond in a more positive way if they were given notice of any plans. Another care plan guided staff on how to respond to an individual if they declined their meal. 'I have a good appetite most of the time but there are times when my appetite is not so good. Please don't worry too much encourage me to drink more milk I rarely refuse a jacket potato with cheese.'

There was an enabling and supportive culture. Staff empowered people to have voice and achieve their potential. People told us that they were involved in decisions about their care. Staff were provided with guidance and information on the levels of support needed to ensure effective communication. One person's care plan stated, 'I need time to process, so leave me with the question and ask me again later.' Staff were knowledgeable about people and their needs and how to work with them effectively. One member of staff told us, I generally work with (name of individual), it's a strong team and we work in a consistent way."

People had clear goals documented on areas such as decision making or using the cash machine to remove money. Staff were clear about these goals and the steps that they were taking to support people to achieve them. Annual reviews were undertaken to review individual progress and plan ahead.

The registered manager was aware of the assessable information standard and had started the process of engaging with people. All policies were being reviewed and were being written in an accessible format.

No one using the service was receiving end of life support. There were clear plans in place in the event of an emergency and the registered manager was aware of the issues and was working with families and individuals to meet people's individual needs.

We observed that staff knew the people they supported well and we observed that they encouraged people to be as independent as possible through enabling and empowering them to complete tasks and take part in daily activities such as food preparation and cleaning.

People were supported to access the community and lead a full and interesting life. They had an individual activity planner which set out their programme for the week which included household tasks as well as work and social activities. A number of people had been supported to access paid employment in a range of services including catering and retail which reflected their interests. They clearly enjoyed their work and challenges that this presented.

People told us that they were happy and had no reason to raise concerns but if there was a problem they would tell their family or staff. Relatives told us that they had a good working relationship with the staff and felt able to raise concerns. They told us that any comments or suggestions which had been made had been addressed promptly the management of the service. Complaints procedures were in place including an easy to read version. People had access to advocacy organisations if needed.

Is the service well-led?

Our findings

At this inspection, we found people continued to receive support from a well led service

People and their relatives continued to express confidence in the management team. They told us that they were approachable and helpful. One person told us that, "The setup is brilliant." A relative told us, "Issues are always dealt with very professionally."

The service had a clear vision which focused on people and promoting their independence. Staff were clear about what they were trying to achieve and their role and responsibilities. Staff morale was good. One member of staff told us, "It a positive company I couldn't ask for better bosses." Another said, "It is a lovely team and we communicate well." There were clear systems in place to support staff, such as through regular supervisions, appraisals and team meetings. Staff told us that there were clear arrangements in place for on call which worked effectively.

People, relatives and representatives expressed their views and experiences about the service through meetings, individual reviews of their care and in annual questionnaires. People's feedback was valued, respected and acted on. Relative's told us they were regularly updated as to changes in the health and welfare of their relatives.

Documentation for people using the service and staff was well organised and people needs and progress were clearly documented.

The registered manager and the other director regularly visited the service and had oversight of the care provided. The manager oversaw a quality assurance cycle which set out what areas should be reviewed throughout the year. Audits were undertaken on areas such as supervisions, support plans and medication records. We saw that there was documentation to evidence that areas such as incidents, accidents and the impact on individuals were reviewed on a regular basis. Data was collected to identify trends and learning.

Since the last inspection the registered manager had worked on building networks with other local services to reflect on practice and enable learning.