

Leonard Cheshire Disability

The Regent

Inspection report

The Regent
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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

About the service: The Regent provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. There were nine people using the service at the time of our inspection.

The outcomes for people using the service reflected the principles and values of Registering the Right Support in the following ways [promotion of choice and control, independence, inclusion] e.g. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

The size of service meets current best practice guidance. This promotes people living in a small domestic style property to enable them to have the opportunity of living a full life.

People's experience of using this service: People were happy with the care provided and told us staff were kind, helpful and promoted their independence.

Staff were appropriately vetted before starting work to ensure they were suitable to work with potentially vulnerable people. Staff had received training in the safeguarding of vulnerable adults.

We received mixed views about staffing. Some relatives told us there had been a high turnover of staff and there was a small number of vacancies at the time of the inspection. Recruitment was ongoing, and people said they continued to receive the care they needed in a timely manner by staff they were familiar with.

Staff received regular training relevant to their role to support them to care for people effectively.

The privacy and dignity of people was promoted and protected, and staff were aware of the importance of equality, diversity and human rights needs being supported.

At this inspection, staff were clearer about the remit of a supported living service and people were encouraged to be as independent as possible.

Improvements had been made to care planning and person-centred plans were in place which meant people's physical, social and emotional needs were considered when planning care and support.

Improvements had been made to systems to help the provider monitor the quality and safety of the service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update: Requires Improvement. Published (14 March 2018).

Following the last inspection, we asked the provider to complete an action plan to show what they would do

and by when to improve. At this inspection we found improvements had been made and the provider is no longer in breach of regulations.

Why we inspected: This was a planned inspection which was based on the previous rating.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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 ●

The Regent

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 carried out by one inspector and an expert by experience who made telephone calls to people and their relatives. An expert by experience is someone who has personal experience of using or caring for someone who uses this type of service.

Service and service type:

The Regent provides care and support to people living in a 'supported living' setting, 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.

The service did not have a registered manager at the time of the inspection. A new area manager had been appointed and was in the process of registering with CQC.

Notice of inspection:

We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

What we did:

The provider had submitted a Provider Information Return. Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We spoke with the local authority safeguarding and commissioning teams, and Healthwatch. Healthwatch is

an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We took the information they provided into account when carrying out our inspection.

We spoke with three people, three relatives, an area manager, deputy manager and six care staff.

We checked three staff recruitment files, four care plans and a variety of records relating to the quality and safety 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.

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

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) 2014.

At this inspection we found sufficient improvement had been made and the provider was no longer in breach of regulation 12.

- Individual risks to people had been assessed and monitored. People were involved in discussions about risk.
- Where positive risk taking had been agreed, the outcome was reviewed and documented in care records. For example, one person who wished to mobilise independently when they felt able to, had recorded they had taken the risk and not fallen. They told us this allowed them to be more independent.

Systems and processes to safeguard people from the risk of abuse

- People they felt safe. One person told us, "I like my own space but always have someone on hand." People were supported to be independent but were able to summon help if needed.
- Staff had received safeguarding training and knew what to do in the event of concerns about people. Safeguarding procedures had been updated.

Staffing and recruitment

- There were staff vacancies and the provider was in the process of recruiting new staff. People told us this had not impacted upon their care. One person said, "Staffing is good and the response times of staff is very good." One staff member told us, "We have been short staffed but no one cuts corners and no one is ever in a hurry."
- Vacancies were covered by regular agency staff who knew the service and people well.
- Safe recruitment procedures were followed which helped to protect people from abuse.

Using medicines safely

- A small number of people required support with medicines and the correct procedures were followed.
- Appropriate assessments had been carried out where people took responsibility for their own medicines; there were clear instructions about the level of support other people needed.
- Staff received training in the administration of medicines and had their competency checked to do so on a regular basis.

Preventing and controlling infection

- People were supported in their own homes, therefore cleaning tended to be an individual concern, with staff supporting only when necessary.
- Where people were supported with personal care, staff were aware of the correct procedures to follow and had access to gloves and aprons.

Learning lessons when things go wrong

- Accidents and incidents were recorded and analysed for patterns and trends.
- Governance meetings were held where lessons learned could be discussed. All managers met to look at lessons learned from incidents that had occurred in the organisation nationally.

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.

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

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.

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- The service was operating within the principles of the MCA. Records had improved relating to specific decisions made in people's best interests.
- Staff had received in depth training and were confident in issues relating to capacity and consent. They demonstrated a good understanding between complex and life changing decisions and every-day decisions.

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

- Assessment processes were in place for when new people were referred to the service.
- People were involved in care planning, and their choices were considered.

Staff support: induction, training, skills and experience

- Staff received regular training, supervision and appraisals and told us, "We have loads of training and refresher days. The team leader does spot checks to check you are doing things right."
- The provider checked that staff had the training they needed to look care for people. They found there were gaps and additional training in positive behaviour support and advanced autism awareness was provided.

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

- People were supported with eating and drinking where appropriate. Staff were aware of who needed help with this.
- Some people were supported with meal planning and shopping, and to eat more healthily if they wished to. One person who had support from staff told us, "They take me shopping then we go to a café. They always ask what I want. I get what I like."

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

- There were numerous examples of staff working with other agencies. One person had been supported to access specialist support which was out of the local area, to meet their specific needs.

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

- People had access to a range of health professionals. They were supported where required to attend appointments in the community.
- One person told us they had experienced dizzy spells and had received support to have this checked by relevant health professionals. They felt reassured by and confident in staff.

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.

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 treated with respect. One person told us, "The staff are absolutely fantastic. They have bent over backwards and helped my confidence and growth."
- Staff spoke positively about their role and said they 'loved' their work.
- We saw numerous examples of where people's equality, diversity and human rights needs were promoted and respected.

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

- People were encouraged to express their views and felt involved in decisions about their care. One person told us, "They [staff] always ask me what I want to wear or eat, it is all down to me. I am in the driving seat."

Respecting and promoting people's privacy, dignity and independence

- We were provided with numerous examples of how the service was more focused on encouraging independence than it had been previously.
- People no longer visited the office to ask staff to contact relatives by telephone on their behalf. Staff supported them to do this for themselves from their own home.
- People told us they took more responsibility for things now such as collecting their own prescriptions, managing their finances, and reporting repairs to their housing association.
- People's privacy and dignity was respected.

Is the service responsive?

Our findings

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

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

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

At our last inspection the provider had failed to ensure that care and treatment provided met people's needs and reflected their preferences. This was a breach of regulation 9 (Person-centred care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found sufficient improvement had been made and the provider was no longer in breach of regulation 9.

- Person centred care plans were in place which provided clear direction to staff about the level of support people needed.
- People were fully involved in the care planning process. One person had written some of their own care and support plans. They told us, "Staff asked me if I would be confident to craft it myself. It was then just tweaked with my consent."
- People's physical, psychological, social and emotional needs were considered by staff when planning care. A record of people's likes, dislikes, hobbies and interests was held.
- Staff told us, "We are key workers for people and have regular sessions with them to do care plans." Where people had opted not be involved in reviews of their care, this was recorded by staff.

Improving care quality in response to complaints or concerns

- Various information for people, including the complaints procedure, was available in an easy read format. People confirmed they knew the procedure to follow.
- A small number of complaints had been received and these had been taken seriously by the provider and investigated in line with their procedures.

End of life care and support

- Most people using the service were younger and did not have life limiting conditions.
- Information was available to help people make decisions about their care at this important time, if they wished to do so in advance.

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.

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 requirements

At our last inspection the provider had failed to ensure systems were in place to monitor and improve the quality and safety of the service provided, and mitigate risks to the welfare of service users and others. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) 2014.

At this inspection we found sufficient improvement had been made and the provider was no longer in breach of regulation 17.

- A new area manager was in post and has successfully completed their registration since our visit.
- The new area manager had a strong background in working in supported living services. They had supported the deputy manager to strengthen governance systems and the service had a clearer direction and identity.
- Staff told us they felt well supported by the area manager and deputy manager.
- The area manager and deputy manager were clear about their legal duty to notify CQC of certain incidents and events.

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 area manager was aware of the need to be open and transparent. They were committed to providing high quality person-centred care.
- The local authority quality and safeguarding teams told us the provider was open and transparent.

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

- People were happy with the way the service was managed. One person told us, "The new manager came and introduced themselves to me. They went out of their way to do that and passed me their email address."
- There were regular 'tenant's' meetings where people were reminded about how to raise any concerns about the service. One person told us, "There are really clear lines of communication. They always seem to put the client first."
- People's equality and diversity was well supported by staff who had a clear understanding of best practice

in this area.

Continuous learning and improving care

- There were various audits and checks on the quality and safety of the service. Any concerns identified were acted upon.