

Supported Independence Limited

Kingscourt

Inspection report

100-102 Kings Drive
Bishopston
Bristol
BS7 8JH

Tel: 01179232132
Website: www.supportedindependence.co.uk

Date of inspection visit:
18 February 2017

Date of publication:
20 March 2017

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

Kingscourt is registered to provide accommodation for up to six people with a learning disability who require personal care. At the time of our inspection the service was providing support to six people.

At this inspection we found the service remained Good.

Why the service is rated good:

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

Risks to people were assessed and where required a risk management plan was in place to support people manage an identified risk and keep the person safe.

Staffing numbers were sufficient to meet people's needs and this ensured people were supported safely. People told us they felt safe living at the service.

The provider ensured that new staff completed an induction training programme which prepared them for their role. Training was completed in essential matters to ensure staff and people at the service were safe. Staff were supported through a supervision programme.

People were supported to maintain good health and had access to external health care professionals when required.

Staff were caring towards people and there was a good relationship between people and staff. Staff demonstrated an understanding of the needs and preferences of the people they cared for.

Support provided to people met their needs. Supporting records highlighted personalised information about what was important to people and how to support them. People were involved in activities of their choice.

There were systems in place to assess, monitor and improve the quality and safety of the service. Staff described the registered and assistant manager as supportive and approachable. Comments from people confirmed they were happy with the service and the support received.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Kingscourt

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 checked 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.

This comprehensive inspection took place on 18 February 2017. The inspection was announced, which meant the provider knew we would be visiting. This is because we wanted to make sure the provider, or someone who could act on their behalf, would be available to support the inspection. This inspection was carried out by one inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

On the day of the inspection we spoke with four people, two members of staff and the assistant manager. We also spoke with two relatives visiting the service.

We looked at three people's care and support and medicine administration records. We also looked at records relating to the management of the service such as the daily communication records, incident reports, audits, supervision and training records.

Is the service safe?

Our findings

People told us they felt safe living at the service. Staffing numbers were sufficient to meet people's needs and this ensured people were supported safely. Staff we spoke with felt the staffing level was manageable. Staffing rotas demonstrated that the staffing levels were maintained in accordance with the dependency needs of the people who lived at the service. We observed that there were sufficient staff to assist people when needed, such as supporting personal care needs and taking people out.

We were told that recruitment procedures ensured all pre-employment requirements were completed before new staff were appointed and commenced their employment. An enhanced Disclosure and Barring Service (DBS) check had been completed. The DBS check ensured that people barred from working with certain groups such as vulnerable adults would be identified. Records were held at the provider's head office.

Staff demonstrated a good understanding of abuse and knew the correct action to take if they were concerned about a person being at risk. Staff had received training in safeguarding adults. Staff told us they felt confident to speak directly with a senior member of staff and that they would be listened to. Staff were aware that they could report their concerns to external authorities, such as the local authority and the Commission.

Risks to people were assessed and where required a risk management plan was in place to manage an identified risk and keep the person safe. These included assessments for the person's specific needs such as financial management, accessing the community, road safety and daily living skills. Assessments were reviewed regularly and updated, when required.

People were receiving their medicines in line with their prescriptions. Staff had received training in medicines management. Staff administering medicines were knowledgeable about the medicines they were giving and knew people's medical needs well. PRN protocols were in place for each person. The term PRN is given to a medicine which is to be taken, 'When required' and is usually prescribed to treat short term or intermittent medical conditions and not to be taken regularly.

People were cared for in a safe, clean and hygienic environment. Staff were allocated daily cleaning duties. The rooms throughout the service were well-maintained. People kept their bedrooms how they liked things to be arranged. Regular maintenance checks were undertaken to ensure equipment and the building remained in good repair.

Is the service effective?

Our findings

People's rights were being upheld in line with the Mental Capacity Act (MCA) 2005. This is a legal framework to protect people who are unable to make certain decisions themselves. Where appropriate people's support plans held information about their mental capacity and Deprivation of Liberty Safeguards (DoLS) applications. These safeguards aim to protect people living in a service from being inappropriately deprived of their liberty. These safeguards can only be used when a person lacks the mental capacity to make certain decisions and there is no other way of supporting the person safely. Three DoLS applications had been authorised and the conditions were being met.

Staff understood the importance of promoting choice and empowerment to people when supporting them. Where possible the service enabled people to make their own decisions and assist them to understand the decision making process. Support plans held decision making agreements and advised staff how to assist a person to make day-to-day decisions. Best interest decision making agreements involved the appropriate health professionals, staff and family members.

The provider ensured that new staff completed an induction training programme which prepared them for their role. A training programme had been introduced in line with the Care Certificate guidelines. These are recognised training and care standards expected of care staff. Staff received on-going training to enable them to fulfil the requirements of the role. We reviewed the training records which showed training was completed in key aspects of care to ensure staff and people at the service were safe. Additional training specific to the needs of people who used the service had been provided for staff, such as managing violence and aggression. Plans were in place for staff refresher training for modules that had expired.

Staff were supported through a supervision programme. Supervision is where staff meet one to one with their line manager. Conducting regular supervisions ensured that staff competence levels were maintained to the expected standard and training needs were acted upon.

People's nutrition and hydration needs were met. People were encouraged to eat a healthy balanced diet. If people wanted alternatives to the menu choice their decision would be respected. Where required the service sought dietary advice from health professionals. We observed people selecting foods of their choice for their mealtimes. People we spoke with told us they liked the food and had access to snacks, if required.

People were supported to maintain good health and had access to external health care professionals when required. People's care records demonstrated that their healthcare needs had been assessed and were kept under review. We saw people had received input from the community learning disabilities team, GP, occupational therapist and psychologist.

Is the service caring?

Our findings

One person told us; "I like living here. I feel safe. I have meetings with staff. We're good friends." People were supported by a small, committed and experienced staff team. Enabling relationships had been established between staff and the people they supported. Support plans to enhance people's independence were promoted by the service and staff members. Each care plan held personal care needs which specified the support required by the individual.

To ensure their needs were met people had access to their own key worker. This provided one-to-one time with the person to discuss their needs and formulate action plans. One person's aim included the need to improve their road safety. They wanted to become more independent. Agreed goals with the keyworker included developing the person's activities plan and working together with them until they enhanced their road safety confidence.

Staff demonstrated they had a good understanding of people's individual needs and told us they understood people's preferences. One member of staff provided examples of how people preferred their personal care routine to be conducted and told us they encouraged people to be independent, as far as possible. For one person this included supporting a person wash their hair and back. Staff told us that they would offer hands on support when requested or required. Staff enabled people to undertake tasks themselves. People also assisted staff with the meal preparation and household chores.

Our observations showed that good relationships had been established between staff and the people they provided care for. Staff spoke about people in a meaningful way and took an active interest in what people were doing. Staff continually offered support to people with their plans. People were being taken out for a pub lunch and helping with the food shopping. They were also deciding what they would like for their weekend takeaway dinner. Staff were also arranging with a family member a time their relative could cook a meal for them and take it to their house. The person really appreciated the help provided by the staff as they liked to see their family regularly. There was a cheerful atmosphere and lots of laughter throughout the service.

Staff respected people's privacy. We observed people knocking on the person's door seeking permission to enter. People were able to have time alone and their personal space was respected. We spoke with one person and they told us liked spending time in their room and particularly liked listening to music and watching their favourite DVD's. Their room was decorated with personal items of their choice.

Is the service responsive?

Our findings

The service was responsive to people's needs. People's needs were met by a small staff team who worked together to offer the best care they could. People received good care that was personal to them and staff assisted them with the things they made the choices to do. We observed that people appeared happy living in the service and they received the support they required.

A care plan was written and agreed with individuals and other interested parties, as appropriate. Care plans were reviewed regularly and a formal review was held once a year or if people's care needs changed. Reviews included comments on the support plan, the person's health, social and leisure activities, personal safety and risks. Staff responded to any issues identified by the person by amending plans of care, changing activity programmes and consulting external health and care specialists, as necessary. An example of a recent referral included seeking advice from a health specialist regarding the effective management of one person's challenging behaviour.

People's individual needs were recorded and specific personalised information was documented. Each person's care plan included profiles agreed with their keyworker and included what was important to the person and how best to support them. People in the service were supported in what they wanted to do. The activities recorded varied for people according to their chosen preferences. This included attending horse therapy, voluntary work, drama, arts, playing pool and going out with staff.

Where appropriate people were encouraged to maintain contact with their family and were therefore not isolated from those people closest to them. One family member felt that communication could be improved but confirmed they were involved in care plan meetings.

The provider had systems in place to receive and monitor any complaints that were made. During 2016 one formal complaint was received. The complaint was investigated by a senior member of staff and processed in accordance with their complaints policy. People told us they would speak to staff if they were unhappy.

Is the service well-led?

Our findings

There was a registered manager in post. 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.

Staff described the assistant and registered manager as supportive and approachable. The registered manager encouraged an open line of communication with their team. Staff members confirmed that they would approach the assistant and registered manager if they had any concerns. Staff we spoke with felt supported with their training and supervision programme. Staff all had an in-depth knowledge of the people they supported and had the confidence to enable the people they support, such as trying new techniques when dealing with challenging behaviour.

People and their representatives were encouraged to provide their views and were actively involved in the decision-making process, such as the choice of their activities and their future goals. Regular house meetings were held to seek people's views on the service and their thoughts on issues such as food and their requirements. One relative told us; "[Person's name] is very happy. We see her at the weekends and she looks forward returning to the service. We all get involved with the care plan meetings."

To ensure continuous improvement the registered manager conducted regular compliance reports. They reviewed issues such as; staffing, training requirements, maintenance, sickness monitoring, incidents and maintenance. The observations identified compliant practice and areas where improvements were required. This included the need to conduct appraisals within a set deadline and update the service computers.