Community Integrated Care

South West Supported Living

Inspection report

Flat 15 Red Oak Court
Worgret Road
Wareham
BH20 4FR

Tel: 01202026090

Date of inspection visit:
10 May 2022

Date of publication:
27 May 2022

Ratings

Overall rating for this service	Requires Improvement
Is the service well-led?	**Inspected but not rated**

Summary of findings

Overall summary

About the service
South West Supported Living is a supported living service. Not everyone who uses this service receives personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

At the time of the inspection, the service was providing personal care to 15 people with a learning disability and autistic people across six settings in the Bournemouth area. There was a central office in Wareham.

The supported living settings varied between individual flats with sole occupancy to houses with shared living areas, kitchens and individual bedrooms.

People's experience of using this service and what we found
Improvements have been made to the governance systems since our last inspection. Quality audits were completed, reviewed and analysed to identify trends and themes and learning was taken from these and shared with staff. Audits included medicines, care plans, fire systems, health and safety, finance and accidents and incidents.

There were robust audit processes and systems in place that guided staff to ensure people were cared for safely. The service manager told us staff appreciated the changes that had been made and understood the importance of ensuring people received safe, effective, responsive care and support. The registered manager told us the staff worked well together and morale was good.

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
The last rating for this service was requires improvement (published 21 January 2022) and there were multiple breaches of regulation. Following the inspection, we told the provider when they must be compliant and meet the regulations. At this inspection we found improvements had been made and the provider was no longer in breach of regulation 17.

Why we inspected
We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all

areas of a key question.

Follow up
We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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 well-led?

Inspected but not rated

At our last inspection this key question was rated requires improvement. We have not changed the rating as we have not looked at all of the well-led key questions at this inspection. The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

South West Supported Living

Detailed findings

Background to this inspection

The inspection
This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 17 Good Governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Inspection team
The inspection was carried out by one inspector.

Service and service type
This service provides care and support to people living in six 'supported living' settings, so 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.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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 contacted the local

authority for their views on the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection
We spoke with the registered manager and the service manager. We reviewed a range of records, this included quality assurance audits, medicine audits, care plans, health and safety audits and action plans. We looked at records relating to the management of the service, including policies and procedures.

Inspected but not rated

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 the last inspection this key question was rated as requires improvement. We have not changed the rating as we have not looked at all of the well-led key questions at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At our last inspection the provider had failed to ensure governance systems were operating effectively to ensure risks were managed and audit processes operated effectively. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider had made improvements to their quality assurance systems which ensured they were operating effectively. A variety of audits were completed, these included, care plans, medicines, finance, health and safety, fire and people's daily records.
- The service manager told us, "Staff take ownership of each audit allocated. Any problems are noted, documented, actioned and signed off."
- Where actions had been identified from completed audits, a full audit trail had been completed. This included action taken, date, signature of staff member completing the audit and the outcome. A system had been implemented to ensure audits were reviewed and analysed to identify possible themes and trends.
- The service manager had clear oversight of the service and was able to act effectively in identifying potential risks for people. People had hospital passports, one-page profiles, and documents covering what would mean a good day and a good week for them. These gave staff clear guidance and information to help support people safely and in ways they preferred.
- The registered manager and service manager told us they felt well supported in their roles by the senior management team. The service manager told us, "Staff morale has improved and is still improving, especially when staff see the improvements in the systems. When things are addressed, they are taken well, and they are reflecting more and asking more questions. They are very supportive of each other and very good at helping each other. They are very equal in sharing out and completing their set tasks."
- The provider had an ongoing system in place for supporting and monitoring the home and providing a process for ensuring continual improvement was core to the running of the service. This included weekly meetings, a detailed continuous improvement action plan and regular visits to the service.