

Freedom Supported Living Limited

Freedom Supported Living Registered Office

Inspection report

35 The Meadows Meadow Fields Darwen Lancashire BB3 0PF

Date of inspection visit: 19 December 2016

Date of publication: 21 February 2017

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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

This was an announced inspection which took place on 19 December 2016. We had previously carried out an inspection in August 2015 when we found two breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014; these related to the lack of refresher training for staff and the need for more robust quality assurance processes. During this inspection we found the required improvements had been made and the provider was now meeting these regulations.

Freedom Supported Living is registered to provide personal care to people in their own homes. The service specialises in providing support to people with a learning disability. Support is provided both to individuals and to people living in small group settings. At the time of our inspection there were four people using the service.

The provider had a registered manager in place as required by the conditions of their registration with the Care Quality Commission (CQC). 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 registered manager was also the sole director of the company which owned the service.

People told us they felt safe with the staff that supported them and considered staff had the right skills and experience to meet their needs. They told us staff were kind, caring and respectful of the fact that they were supporting them in their own homes.

Staff had received training in safeguarding adults. They were able to tell us of the action they would take to protect people who used the service from the risk of abuse. They told us they considered they would be fully supported by the registered manager should they report any concerns.

People who used the service were involved in the recruitment of staff; this helped to ensure staff had the appropriate qualities and interests to support people to achieve their goals. Recruitment processes in the service were sufficiently robust to protect people from the risk of unsuitable staff.

Systems were in place to help ensure the safe administration of medicines. Although people who used the service were responsible for the administration of their own medicines at the time of this inspection, we noted all staff had completed training in the safe handling of medicines; this helped to ensure they were able to support people to take their medicines as prescribed should this be necessary.

Staff were aware of how to manage risks of cross infection. We noted people who used the service were supported to maintain the cleanliness and safety of their homes.

Staff understood the principles of the Mental Capacity Act 2005 and where necessary had taken appropriate

action to safeguard the rights of people who used the service. People told us staff always respected the choices and decisions they made.

Systems to monitor staff training had improved since our last inspection. An annual training plan was in place and staff were clear about when refresher training was required. Staff also received regular supervision to help ensure they were able to provide effective support to people who used the service.

People who used the service received the support they needed to attend health appointments. Staff encouraged people to make healthy nutritional choices.

There were opportunities for people who used the service to comment on the support they received. We noted that people had been involved in review meetings to help ensure they were supported to achieve the goals which were important to them.

Staff we spoke with told us they enjoyed working in the service. All the people we spoke with told us the registered manager was supportive and approachable. People who used the service told us they felt able to contact the registered manager or any other member of staff should they have any concerns regarding the support they received.

Quality assurance systems had improved since our last inspection. Regular audits took place to check that records relating to the care people received were up to date and accurate. Environmental checks also took place to help ensure the safety of the environments in which people lived.

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

People who used the service told us they always felt safe with the staff who supported them. Staff had received training in safeguarding adults and knew the correct action to take if they witnessed or suspected abuse.

People who used the service were involved in recruiting the staff who would be supporting them. Robust recruitment processes were in place to help protect people from the risk of unsuitable staff.

Systems were in place to help ensure the safe administration of medicines.

Good

Is the service effective?

The service was effective.

Staff had received the training and supervision they required to support them to deliver effective care.

Staff understood the principles of the Mental Capacity Act 2005 and the need to support people to make their own decisions and choices.

People received the support they needed to access healthcare services. Staff helped people who used the service to make healthy nutritional choices as much as possible.

Is the service caring?

Good



The service was caring.

People told us that staff provided the care and support they needed. Staff were observed to be kind, caring and respectful of people.

Staff demonstrated a commitment to providing person-centred care which supported people to achieve their goals.

People's confidential information was stored securely. Good Is the service responsive? The service was responsive. People told us they always received the support they needed. They told us they had been involved in developing and reviewing their support plans. There was a complaints procedure in place to enable people to raise any concerns. Staff supported people to attend activities to promote their health and well-being. Is the service well-led? Good The service was well-led. The service had a manager who was registered with the Care Quality Commission. They were also the sole director of the company which owned the service. Staff we spoke with told us they enjoyed working in the service and considered it was well-run for the benefit of the people they

Systems were in place to assess and monitor the quality of the service provided. Arrangements were in place to seek and act upon feedback from staff, people who used the service and their

supported.

families.



Freedom Supported Living Registered 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.

This inspection took place on 19 December 2016 and was announced. The provider was given notice of our intention to inspect the service because the location provides a domiciliary care service for adults who are often out during the day; we needed to be sure that the registered manager, staff and people who used the service would be available to speak with us.

The inspection team consisted of one adult social care inspector and one inspection manager.

Prior to the inspection we reviewed the information we held about the service. We also contacted the Local Authority safeguarding team, the local commissioning team and the local Healthwatch organisation to obtain their views about the service; the commissioning team and Healthwatch told us they did not hold any information about the service as people contracted privately with Freedom Supported Living for their care and support.

With their permission we visited the four people who used the service in their own homes and spoke with the two staff who were supporting them at the time. We looked at the care records for two people who used the service. We also looked at a range of records relating to how the service was managed; these included four staff personnel files, training records and policies and procedures.



Is the service safe?

Our findings

All the people we spoke with told us they felt safe with the staff who supported them. One person commented, "There's no doubt we feel safe here." Another person told us, "We feel comfortable and safe here with [name of staff member]."

Staff told us, and records confirmed, they had received training in safeguarding adults. Staff we spoke with were able to tell us of the action they would take to protect people who used the service if they witnessed or suspected abuse had taken place. Staff told us they would also be confident to use the whistle blowing procedures in place for the service if they observed poor practice from colleagues and were certain they would be listened to by the registered manager. One staff member told us, "I would report any concerns to [name of registered manager]. He would have to listen; he doesn't have a choice. I would report concerns to the safeguarding team if no action was taken."

People who used the service told us staff were always available to meet their needs. The registered manager told us that, following reviews with the local authority, the two people who were provided with 24 hour support had received an increase in the number of hours they received for 1-1 support. We were told that people were able to use this increase in support hours flexibly to meet their individual needs and interests. One person told us how they were 'banking' some of their hours so that they could take trips with staff to places they enjoyed visiting.

The registered manager told us they had begun the process to recruit a new staff member to the service following the increase in allocated hours to people. People who used the service told us they had been involved in compiling a list of questions they wanted to ask prospective staff and had been part of the interview process; this meant they were confident that the new staff member would be able to offer them appropriate care and support. One person told us, "We are part of the interviews. We find out about them [prospective staff] and judge whether we will get on with them."

We looked at the personnel files for three staff employed in the service and the recruitment file for a person who had recently applied to work in the service. All files contained proof of identity, application forms that documented a full employment history, a job description and at least two references. Checks had been carried out with the Disclosure and Barring Service (DBS). The DBS identifies people who are barred from working with children and vulnerable adults and informs the service provider of any criminal convictions noted against the applicant. This helped to protect people from being cared for by unsuitable staff.

Care records we reviewed included information about the risks people who used the service might experience and the support strategies staff should use to help manage these risks. We saw that risk assessments had been regularly reviewed and updated when people's need changed.

We looked at the systems in place to help ensure the safe administration of medicines. None of the people who used the service at the time of the inspection required staff to administer their medicines. One person told us, "I have my medicines upstairs. I'm good at remembering but staff always check I've taken them."

Another person commented, "We show [name of staff member] what tablets we've got but it's our responsibility to take them."

We saw that all staff had completed training in the safe handling of medicines. Policies and procedures were also available to guide staff undertaking this task. This meant that if people did require staff to administer medicines they were aware of the correct action to take.

Staff we spoke with told us they were aware of how to manage risks in relation to cross infection and that they had access to appropriate personal protective equipment. They told us, they were respectful of the fact that they were working in people's own homes and that it was their role to encourage people to keep their properties clean. One person who used the service told us, "We are doing the cleaning now. We take pride in our house."

We saw there were systems in place to ensure the properties in which people who used the service lived were safe and that regular checks were carried out in relation to the environment. A fire risk assessment was in place together with a business continuity plan; these helped to ensure staff were aware of the correct action to take in the event of an emergency at the property at which they worked. Regular fire checks and evacuation drills also took place. People who used the service told us they were involved in completing the environmental checks for the properties in which they lived. One person commented, "We do checks to make sure we can unlock the doors so we know how to get out if we have a fire."



Is the service effective?

Our findings

People who used the service told us staff had the skills and knowledge necessary to provide them with the support they required.

We checked whether the service was working within the principles of the Mental Capacity Act (MCA) 2005. The 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.

People can only be deprived of their liberty so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. However, people cared for in their own homes are not usually subject to DoLS.

Staff we spoke with told us they had completed training in the MCA and DoLS. They demonstrated a good understanding of the impact of this legislation on their work with people who used the service. A staff member told us, "I am aware of the MCA and the need to promote choice and respect people's wishes." Another staff member commented "They [people who used the service] get to choose how and when they receive support."

We saw that appropriate arrangements were in place to ensure people had the capacity to make decisions in relation to the care they needed. Staff told us they had requested a social worker to assess whether one individual fully understood the need for staff to provide support outside of the home to help ensure their safety; this meant the person's rights were respected and upheld.

People who used the service confirmed staff would always respect the choices they made. One person told us, "We decide what we want to do or where we want to go each day."

Care records we looked at were personalised and included the goals people wanted to achieve with the support they received. We saw that people were supported to maintain a record of their achievements. One person told us how they were supported by staff to 'gig' at local pubs which helped to promote their self-esteem.

Records we reviewed showed people were provided with support to help ensure their health and nutritional needs were met. Staff told us they would support people who used the service to devise weekly menus and try to encourage people to eat as healthily as possible. One staff member commented, "We can devise healthy options but if they want to buy something unhealthy when we are shopping for food, it's their choice." A person who used the service confirmed, "They [staff] advise us but they can't tell us what we can and can't eat."

People who used the service told us, where necessary, staff would accompany them to health

appointments. One person told us, "Staff take us to appointments such as medical reviews but we can decide if we want them to come in with us." A staff member told us they had recently ensured both people they supported had attended a 'well man' check at the local health centre.

We noted people who used the service had health action plans in place. These are documents which record the support an individual needs to stay healthy or when accessing healthcare services. We saw that these had been reviewed regularly with people to ensure they remained up to date.

Both the staff members we spoke with had been employed in the service for several years. We therefore asked the registered manager how they intended to support the staff member they were in the process of appointing. They told us the person had already undertaken some shifts as a volunteer at the service in which they would be working under the supervision of experienced staff. This meant people who used the service had the opportunity to comment on whether they thought the person would be able to provide them with the support they needed. We saw that an induction programme was in place for the staff member to complete which included reading policies and procedures and mandatory training. The registered manager told us they had also made arrangements with the local college for new staff to undertake the Care Certificate when they started their employment in the service; the Care Certificate is a set of minimum standards which new staff are expected to achieve.

Staff we spoke with told us training had improved since the last inspection. One staff member commented, "We have done quite a lot of training now." Records we reviewed showed staff had completed training in topics including DoLS, safeguarding, medication, fire safety, first aid and health and safety. We noted the registered manager had drawn up an annual training plan which detailed the training courses they expected staff to complete and the timescales for refresher training. The registered manager told us that much of the training staff had completed had been online, although they had negotiated with the local college to provide bespoke training for the whole staff team commencing in January 2017.

Staff personnel files we reviewed showed evidence that staff had received supervision in line with the provider's policy. We saw that supervision sessions were used to discuss training, team work and any concerns the staff member might have.



Is the service caring?

Our findings

People who used the service told us staff were always kind and caring towards them. Comments people made included, "Staff are great" and "[Name of staff member] is really kind."

People we spoke with told us staff would always encourage them to be as independent as possible. We noted that staff had supported a person so that they could now make toast independently. They were now discussing what other goals the person wished to achieve in order to promote their independence. We were told that since the last inspection staff had also encouraged people who received 24 hour support to take more responsibility for cleaning their property; they told us this engendered a sense of achievement in the people who used the service.

People told us staff were always respectful of the fact that they were supporting them in their own homes. One person commented, "Staff respect it's our home; I would say if they didn't." During the inspection we observed staff interacted positively with the people they were supporting and encouraged people to discuss plans for the day. This demonstrated that staff ensured people who used the service felt they mattered.

Staff we spoke with were able to show that they knew people who used the service well. They demonstrated a commitment to providing high quality care and support to people. One staff member told us, "I enjoy working here. We make sure all people's needs are met." Another staff member commented, "It's all about meeting people's objectives."

Staff told us they supported the same people on a regular basis; this meant people who used the service had the opportunity to develop caring and meaningful relationships with the staff who supported them.

We saw that care records contained some information about the care people wished to receive at the end of their life. We were told this would be reviewed as people aged or their health deteriorated to ensure it was fully reflective of people's wishes.

We noted that all care records were stored securely. This meant people's confidential information was protected.



Is the service responsive?

Our findings

All the people who used the service told us they received the support they needed and wanted from Freedom Supported Living. They told us staff would always help them to pursue their interests, develop their independent living skills and maintain contact with those people important to them.

Care records we reviewed included information about the level of support people needed to meet their needs; this included personal care, physical health, finances and maintaining contact with family and friends. We saw that some support plans had been created using pictures to help people understand and contribute to what was included in them. Care records included the level of support people wanted from staff and information about how staff should communicate with them.

Records we looked at showed people were involved in planning and reviewing their own care. We noted the latest review conducted with one person included their comments that they were happy with the support they received and had no worries or concerns. A staff member told us that the main reason they enjoyed working for the service was that, "It's all client led. They [people who used the service] get to choose how and when they receive support." People who used the service told us staff supported them to attend activities and places of their choice; this included bowling, swimming and trips to the coast which helped to promote people's well-being.

We reviewed the arrangements to encourage people to share their experience and comment on the support they received. Where the service was responsible for providing 24 hour care to people we saw a system of tenant meetings was in place. This gave people who used the service the opportunity to discuss the care and support they received and to agree future activities. One person who used the service told us, "We have tenant meetings. We go through things and talk about what can be improved." We noted that at the most recent team meeting held in October 2016 discussions had taken place with people who used the service about new furnishings for the house as well as health and safety matters.

People who received weekly support told us they were regularly asked to provide feedback on the support they received to ensure it was meeting their needs. One person commented, "[Name of registered manager] regularly comes to see how we are and how the support is going."

We saw there was a complaints policy in place which gave people information about the response they should expect if they raised any concerns about the support they received. We noted that there had been no complaints received at the service since the last inspection. All the people who used the service told us they would feel confident to speak with staff or the registered manager if they had any concerns about the care and support they received. We were told the registered manager undertook some shifts at the service which meant they were able to speak directly to people about any concerns they might have. One person commented, "[Name of registered manager] would listen to us; he's very understanding."



Is the service well-led?

Our findings

The service had a manager in place who was registered with the Care Quality Commission (CQC) and was qualified to undertake the role. The registered manager was also the sole director of the company which owned the service.

People who used the service told us they had regular contact with the registered manager and were always able to approach them if they wished to discuss the support they received. They told us they were also aware of the on-call system in place in the event they needed to contact a senior member of staff outside normal office hours. One person told us, "If you ever need to talk with [name of registered manager] about anything he is here. We know there is always someone on call if something happens and we have their phone numbers."

All the staff we spoke with told us they enjoyed working in the service and found the registered manager to be approachable. One staff member told us, "I feel the service is well-led. We have a plan for next year and what we want to achieve each quarter." Another staff member commented, "I love this company because of the way it is run for the benefit of the people we support."

Records showed that staff meetings were held regularly. Staff meetings are a valuable means of motivating staff, keeping them informed of any developments within the service and giving them an opportunity to discuss good practice. Staff we spoke with told us they were encouraged to contribute to discussions at staff meetings and that their ideas were always listened to.

We saw that quality assurance systems had been improved since the last inspection. Regular audits took place which included ensuring that care records and risk assessments were up to date and that required environmental checks had taken place.

Since the last inspection the provider had undertaken a quality assurance survey with people who used the service, relatives and staff. We saw that all of the responses were very positive about the service provided. Comments people who used the service had made included, "My life has improved a lot since I've moved to Freedom. I have more choice and control and can do what I like to do" and "My life has improved a lot. I get to go out socialising. I'm trying new things and I'm more confident". Comments staff had made included, "Since working here I have been very happy with all areas of my job. Any concerns/queries I may have get resolved quickly via my colleagues or manager" and "I'm more than happy at Freedom Supported Living; with it being a small company I feel valued."