

BuryILD







BuryILD

Inspection report

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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	

Overall summary

This was an announced inspection which took place on 25 and 26 February 2015. We had previously carried out an inspection 12 December 2013 when we found the service to be meeting all the regulations we reviewed.

BuryILD 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 16 people using the service who were supported by 33 support workers.

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 CQC to manage the service. Like registered providers, they are ‘registered

Summary of findings

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.

People who used the service told us they felt safe with the staff who supported them. Staff had completed training in how to safeguard vulnerable adults and knew the action they should take if they had any concerns in order to protect people who used the service.

Recruitment processes were robust and helped protect people from the risks of unsuitable staff. People told us there were always enough staff to meet their needs and that staff respected their choices about the support they wanted to receive.

Staff received induction, training, supervision and appraisal to help ensure they were able to deliver effective care.

People who used the service provided positive feedback about the staff who supported them. Our observations

during the inspection showed that the interactions between people who used the service and staff were friendly and there was a good rapport between them. There were lots of jokes and laughter whilst at the same time people were polite and well mannered.

Staff were aware of the interests and preferences of people who used the service. All the staff we spoke with demonstrated a commitment to promoting the independence of people they were supporting.

All the people we spoke with told us they would speak to a manager in the service if they had any concerns or complaints. They were confident they would be listened to and that action would be taken to resolve their concerns.

People who used the service, their relatives and staff, were regularly consulted on the service provided and asked to identify where they thought any improvements could be made.

Summary of findings

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.

People who used the service told us they felt safe with staff who supported them. Staff had received training in how to protect people who used the service from the risk of abuse.

Staff had been robustly recruited and there were enough staff to meet people's needs. People received consistent support from an identified staff team.

Good



Is the service effective?

The service was effective.

Staff received the induction, training and supervision they needed to help ensure they provided effective care and support.

People who used the service received appropriate support to ensure their health and nutritional needs were met.

Good



Is the service caring?

The service was caring.

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

Staff we spoke with were able to show that they knew people who used the service well. Staff demonstrated a commitment to promoting people's independence and choice.

Good



Is the service responsive?

The service was responsive.

People who used the service told us they had control over the support they received and that it was flexible to meet their needs.

Systems were in place to record and address any complaints received at the service.

Good



Is the service well-led?

The service was well-led.

There was a manager in place who was registered with the Care Quality Commission.

There were opportunities for people who use the service, staff and relatives to have their say about the support they received and influence the running of the service.

Good



BuryILD

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.

Prior to our inspection we requested a provider information return (PIR); this is a form that asks the provider to give us some key information about the service, what the service does well and improvements they plan to make. We reviewed the information we held about the service including notifications the provider had sent to us. We contacted the Local Authority safeguarding team and the local commissioning team to obtain their views about the service and no issues of concern were raised with us.

We told the provider two working days before our visit that we would be coming. This was to ensure the registered manager and staff would be available to answer our questions during the inspection. The inspection team consisted of one adult social care inspector.

On 25th February 2015 we visited the registered office and spoke with the registered manager and two senior managers and also looked at a range of records that related to how the service was managed.

On 26th February 2015, with their permission we visited four people who were using the service in a supported living environment and spoke with three staff supporting them. With people's permission we looked at their personal care and support records and other documents relating to their support with them.

Is the service safe?

Our findings

All the people we spoke with who used the service told us they felt safe with the staff who supported them. Comments people made to us included, “I feel safe here.” “I feel safe and no strangers are coming to support me.” And “I trust them with my money.”

Prior to our inspection as part of the PIR we sent out questionnaires to people who use the service, their relatives and staff. Six people who used the service, three relatives and fourteen staff responded to our questionnaires. Relatives confirmed that they felt that people who used the service were safe from abuse and harm from support workers. The fourteen support workers confirmed that they knew what to do if they suspected a person who they were supporting was being abused or at risk of harm.

People who used the service told us they were able to raise any problems, worries and concerns they might have with their relatives, any of the staff supporting them or the managers in the service. They were confident they would be listened to and action would be taken to sort the matter out.

We saw that one of the managers attended a coffee morning recently and gave people a copy of the easy read safeguarding policy with the contact details of people they may want to contact if they had any worries or concerns. There was also a discussion about different types of abuse.

We saw that the service had an internal safeguarding policy and procedure and a copy of the local authority reporting procedures. The registered manager told us that staff undertook in house safeguarding awareness training and were also in the process of undertaking the recently updated local authority safeguarding e-learning course. The staff team training record showed that all but one member of staff had completed the in house training and most staff had completed the local authority training in recent years.

There had been one safeguarding investigation which was not substantiated. Despite this the service had reviewed procedures and taken action to help prevent further allegations of this type happening again and this was documented.

The service had a whistle blowing policy. Staff we spoke with understood what action they needed to take in relation to reporting poor practice. A support worker said “I would not hesitate to report anything to the managers.” Staff we spoke with told us that they felt safe and comfortable to work alone with people.

From the conversations we had with people who used the service, staff and the care records we reviewed, we gained information about what action was taken to help ensure people were kept safe, without restricting opportunities for personal development. Risk assessments had been completed for activities people wanted to do such as swimming as well as road safety and household tasks such as ironing and cooking.

We saw that there had been no accidents recorded in the last 12 months. There had been one minor incident recorded. The registered manager told us that all accidents and incidents were reported to the manager on-call or the registered manager. Records showed that where the minor incident occurred that this situation had been reviewed. The registered manager checked out what had happened immediately before and after the incident. A plan had been put into place to help prevent an incident reoccurring and this had been recorded.

There was a ‘disaster plan’ available at every house to use in case of an emergency, for example, if there was a fire. There was also a grab file in place that contained Personal Emergency Evacuation Plans (PEEPs) for each person.

One person who used the service who was involved in health and safety checks at the property showed us the records and told us what action was taken on a weekly basis to help keep people safe, for example, checking smoke detectors. There was an on-call rota that was covered by the three managers of the service. Staff we spoke with told us that on the rare occasion they had to contact on-call managers, they had always responded positively.

People who used the service told us they received consistent support from the staff team that supported them. They confirmed that outside agency staff were never used by the service so “strangers” did not arrive at their home to support them. People told and showed us they

Is the service safe?

always knew who was coming to support them as they had access to their rota. People commented, “We always know who is coming on and my mum does too.” And “I am happy with my support hours and the same staff. I like them.”

The registered manager told us that staff turnover was low. There was only one vacancy and the interview process had been completed and they were waiting for the person’s criminal record check to be returned before allowing them to work directly with people.

People told us they were involved in the recruitment process and this was confirmed on candidate’s records. One person who used the service who was involved in recruitment told us, “They do not employ anyone we do not like.” We also saw on people’s records a copy of ‘My Support Workers Job Description’ which gave clear guidance to staff as to how the person was to be supported.

We looked at the personnel files for two support workers who had recently been employed by the service. We found the necessary pre-employment checks had been undertaken, which included a Disclosure and Barring Service (DBS) or criminal record check.

We saw evidence of interview records where candidates that showed what questions had been asked to help determine why the person had applied for the role, what their key personal strengths were as well as discussion about supporting people who were not able to verbally communicate with them and dealing with behaviours that they might find challenging.

At two of the houses we visited people required some support from staff to assist them to take their medication. We saw that medication was securely held. People told us they took as much responsibility as they were able to self-administer their medication. Records showed that staff had received the training they needed to support people to take their medication. The PIR confirmed that there had been no medication errors in the last 12 months. Medication audits were also seen on the health and safety file.

We saw that Personal Protective Equipment (PPE) was available for staff to use as needed. People that used the service told us that staff always used disposable gloves and aprons as appropriate to their individual needs. House records showed that fridge and freezer temperatures were checked every week to ensure that food was being stored at the correct temperature.

Is the service effective?

Our findings

The staff we spoke with told us they received a 12 week induction and training period to help ensure they were able to provide effective care to people who used the service. The induction training period included spending time at the office, reading the organisation's policies and procedures, shadowing established members of staff on shift and undertaking a range of training. This was confirmed by the records we reviewed and staff we spoke with.

We saw that the majority of the staff team had completed training in a range of topics including the Mental Capacity Act 2005 (MCA), safeguarding vulnerable adults, safe administration of medicines, health and safety and first aid. There was a system in place to ensure staff received regular supervision and an annual appraisal.

A new member of staff we spoke with told us that they had been made to feel welcome and all the staff that they had come into contact with had been helpful. They said that they had felt able to contact other team members to ask any questions they may have had. They had also met with families who they felt were considered to be "part of the team." The staff members we spoke with told us that they felt comfortable to contact managers at any time.

The team training showed all members of the staff team had received training in the MCA. This training would help to provide care workers with guidance about their responsibilities under this legislation which safeguards the rights of people who may lack the capacity to make their own decisions.

The registered manager told us that they were aware of changes to the law around Deprivation of Liberty

Safeguards (DoLS) for people being supported in their own homes. Refresher training around what action staff should take in these circumstances in relation to contacting the person's social worker to make any necessary arrangements under the Court of Protection, was being planned.

Staff we spoke with commented positively about the way people who used the service were supported. They told us that "People are listened to" and "It's fantastic people make all their own choices." Support plans we looked at were highly personalised and contained good information for staff about how each individual wished to be supported and the goals they wished to achieve.

People who used the service told us that they decided what they had to eat and drink. They told us they never ran out of food. One person told us "I always have food in. I love my food." People told us they were supported by staff to shop for food and drink. People who we visited had their own kitchens which were accessible to them at all times. One person told us that they enjoyed baking and that staff supported them to do this.

Records we saw showed that people who used the service had health action plans in place. Where necessary additional health care support plans were in place, for example for supporting people with epilepsy. These are documents which recorded the support an individual needed to stay healthy. People who used the service told us staff would accompany them to health appointments if necessary. One person who used the service confirmed that they had a doctor, a dentist, a chiropodist, saw an optician every six months and had their hearing checked regularly.

Is the service caring?

Our findings

People who used the service were all very positive about the attitude and approach of staff. Comments people made to us included, "It is the best service I have ever had they [staff] understand me and take time to understand me. They are patient." "They [staff] do a fantastic job." And "I would not change this service for anything."

Our observations during the inspection showed that the interactions between people who used the service and staff were friendly and there was a good rapport between them. There were lots of jokes and laughter whilst at the same time people were polite and well-mannered with each other.

People who we asked, who shared a house, told us they got on well with the other person. One person told us "I have lived here for seven years. I am very happy here and get on well with [the service user they shared a house with]." Another person said "We are happy and get on and I would not want to go home now."

Prior to our inspection as part of the PIR process we sent out questionnaires to people who use the service and their relatives. Six people who used the service and three relatives answered that they felt that service users were always treated with respect and dignity and that support workers were kind and caring.

People told us they were encouraged to be as independent as possible. One person told us "They give me plenty of time to do things myself." "Where I can do I do and if I cannot do it myself then they help me do it." Another person told us "I am independent. I do cooking with staff so I do not burn or scald myself."

People told us about how they participated in day to day house hold tasks such as cleaning, setting tables, washing and drying up where they were able. One person who used the service received support from staff to maintain their job.

Some people told us that they used public transport if they were able to for example the local bus service, the Metrolink and Ring and Ride. One person also had their own push bike. Some people used technology to keep in touch with friends and staff for example, mobile phones and the Internet.

A relative commented via our PIR questionnaires before being supported by the service "[My relative] was withdrawn, lacking in confidence and mostly isolated from the community. Now [my relative] lives a very full life, has many interests and a large circle of friends who [they] socialise with on a regular basis. [My relatives] is proud of their achievements and live as nearly independent life as possible."

Is the service responsive?

Our findings

We looked at the care and support records for the four people we visited. We saw that records were produced in an easy read and picture format. Records included a one page profile about the person and personal care and support plans as well as risk assessments. Records were positively written and made reference to the person's strengths as well as the areas they needed support with.

The goals set covered a wide range of areas including, where I live, things I do, things to learn, friends and relationships, being part of my community, keeping healthy and safe, how I feel about myself, control over my life and my support.

On the day of our visits one person who used the service had had a review meeting to check they were happy with the support they were receiving from the staff team and that progress was being made in relation to the goals they wanted to achieve on their 'Action Plan'. A person told us "I am fully involved in all decision making at my 'All About Me' meeting. It is the full team and I am in charge at the meeting." Another person said "My [relative] sorts out finances but otherwise staff pretty much do what I ask. I make all my own decisions."

Staff we spoke with told us what they thought they did well for the people they supported. A support worker told us they thought they promoted people's right to be as independent as possible and to be involved in activities that enabled them to enjoy life as part of the community. Another said they made efforts to enrich people's lives through independence and choice and that staff were open to change and were flexible.

People who used the service that we met had very busy lives and told us about the many activities they were involved in. These included wheelchair aerobics and curling at the sports centre, as well as swimming and Boccia, a sport for athletes with disabilities that have a major impact on motor skills. People also attended group activities through Contact a social activities organisation, Jigsaw, a drama group and sports teams. People also told us that if they did not want to do something this was respected. One person told us, "If I say I don't want to do it I don't. I don't want to go to college."

All the people we spoke with who used the service told us they knew how to make a complaint and were confident they would be listened to by any staff member they spoke with about their concerns. The service complaints procedure had been produced in an easy read and picture format. Records we looked at showed no complaints had been received by the service since our last inspection.

Is the service well-led?

Our findings

The service had a manager who was registered with the Care Quality Commission (CQC). The registered manager had been in post for over ten years. All the people we spoke with as part of this inspection told us that the registered manager and senior managers were always approachable and supportive.

There are many opportunities for people who use the service, staff and relatives to have their say, give feedback about the support they receive and influence the running of the service.

The service holds an annual development day called “Your Day Your Say”. People who use the service, their relatives, trustees and staff all attend the event. The last event was held on 15 May 2014 and covered a range of issues which included the use of technology to support people with communication and a presentation by a person who used the service about a trip to London they had undertaken.

Questionnaires were completed at this event by all three groups asking what three things the service could be doing better from their point of view so that the service could improve the support provided. We saw a list of what action had been taken by the service to respond to suggestions, which included the introduction of a new IT system and a wider range of activities being offered to people.

The service also holds an Annual General Meeting (AGM) to which everyone is invited. The last AGM was held on 7 November 2014 and marked the service’s 20th birthday and included a celebration.

People who use the service also held coffee mornings which gave them the opportunity to discuss the support they received, as a group, and raise any concerns or improvements that they think could be made. People who used the service had recently organised and carried out a fund raising event at a coffee morning for MacMillan nurses.

The coffee mornings were organised by a person who used the service. This person was also the editor and photographer for the service’s Newsletter which was published twice a year. This person said that the Newsletter “Was very important. I like to organise and help other people.” The Newsletter gave people who use the service information about what was happening within BuryILD for example trips out and holidays as well as other events being held by Bury People First a local advocacy group.

People told us that BuryILD’s merger with Contact, a social activities group, had made a huge difference to the organisation. People told us about some of the activities they were involved in such as the Contact allotment as well as day trips out and going away on holidays.

There were a number of quality assurance systems in place in the service, including the analysis of incidents which occurred and audits in relation to health and safety and medication. Managers carry out bi-monthly quality assurance and audit checks at each house and a report of their findings was produced for the registered manager.

The registered manager was supported by a board of trustees. The registered manager produced monthly reports to the board. The board had a strategic plan in place for 2014 – 2015 the progress of which was regularly monitored by them. The trustee meeting agenda had standard items in place to discuss any safeguarding or health and safety issues.

A relative commented in our returned questionnaire “I am amazed and delighted by what [my relative] has achieved in the time they have been with BuryILD.” A person who used the service told us that life with BuryILD was “A happy adventure.”