

Surrey Choices Ltd

Surrey Choices Shared Lives Scheme

Inspection report

Fernleigh Activity Centre, Fernleigh Day Service,
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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

Surrey Choices Shared Lives Scheme is a shared lives scheme which provides people with long-term placements, short breaks and respite care, within shared lives carers (SLC) own homes. At the time of the inspection there were 20 people using shared lives arrangement who received support with personal care. The scheme supported people with physical and health related support needs, some of who were people with learning disability and autism or dementia.

People's experience of using this service and what we found

This was a focused inspection that considered the safe and well-led key questions only. Based on our inspection of safe and well-led people using the shared lives arrangements received safe and person-centred support.

Right Support:

People were supported to choose their own shared lives arrangement which would suit their individual needs and preferences. People's shared lives carers, as well as scheme staff supporting them were recruited safely and trained to provide effective support to people. Everyone knew how to raise concerns if required. The scheme worked with social services to protect people when needed.

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

Right Care:

People received safe care around their individual needs and risks. People were treated as individuals and had person-centred support plans which were regularly reviewed with them and their carers. Staff and carers knew how to safely support people with their medicines, to keep well and free of infections and to maintain a safe living environment. Carers supported people to gain new skills and develop their strengths.

Right Culture:

The scheme's culture was positive, supportive, open and person-centred. One staff member said, "We do the maximum to support people, people are focus on what we do."

The scheme management team and the provider ensured quality and safety of the service was continuously

monitored and improved. People and their representatives, shared lives carers and scheme staff felt appreciated, involved in the service, and listened to. The scheme worked well in partnership with others to provide people with the support of their choosing safely.

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

Rating at last inspection

The last rating for this service was good (published 27 December 2019).

Why we inspected

We received concerns in relation to staffing and the level of care people received. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating remained good to good based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from the concerns. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Surrey Choices Shared Lives Scheme on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Surrey Choices Shared Lives Scheme

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 2 inspectors.

Service and service type

Surrey Choices Shared Lives Scheme is a shared lives scheme, they recruit, train and support self-employed shared lives carers (SLC) who offer accommodation and support arrangements for vulnerable adults within their own family homes in the community.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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.

Inspection activity started on 13 July 2023 and ended on 24 July 2023. We visited the location's office on 13 July 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 3 people using the shared lives arrangements and 4 people's relatives and representatives about their experience. We spoke with 6 members of staff including the registered manager, deputy manager and scheme workers. We spoke with 9 carers supporting people in shared lives. We reviewed a range of records. This included 5 people's care plans and medicines records for people supported with their medicines. We looked at recruitment checks and training records for 3 staff members. A variety of records relating to the management of the service, including audits and action plans were also reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from risk of abuse and neglect. People and their representatives told us they felt safe in their shared lives homes and would be confident approaching the scheme management or staff with any concerns. One relative told us, "I don't worry about [person's] care. They are well cared for, loved and looked after and safe [in shared lives home]. The house feels very safe and secure."
- Staff and carers knew how to report any safeguarding concerns and received safeguarding training. One carer said, "It is my responsibility to report (any concerns). I relay them to [scheme managers]. The whistleblowing and out of hours numbers are also available." One staff member said, "We would create [incident] report which would be shared with management and social worker. We can go to MASH (Multiagency Safeguarding Hub) as well." Staff were supported to escalate any concerns to the local authority in a timely way and worked closely with people's social workers.
- The provider had a clear safeguarding policy in place. The registered manager ensured any safeguarding concerns were appropriately recorded, reported and investigated and worked with the local authority to protect people.

Staffing and recruitment

- All staff were recruited safely and all required pre-recruitment checks were completed. These included checks of identity, right to work in UK, employment history and Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. Carers wishing to provide shared lives arrangements for people were required to undergo an assessment and vetting process.
- There were enough carers and staff to ensure people could safely use the scheme arrangements. The provider continuously engaged with the local community and social services to find prospective carers to enable people to use a shared lives arrangement. There were enough staff and carers to ensure people could be fully involved in the carer 'matching' process and carers had regular breaks to support their well-being.
- Staff working for the scheme had been assigned to support carers and to oversee scheme arrangements for people and they told us their workload was manageable, so they could provide effective and timely support. People, their relatives and carers knew who their scheme workers were and had a positive working relationship with them.

Assessing risk, safety monitoring and management

- People were effectively and safely supported around their individual risks which protected them from avoidable harm. People and their relatives told us carers and scheme staff knew people's needs and helped them to keep safe and well. One relative told us a carer was mindful of the person's needs around personal

care which enabled them to feel comfortable.

- People's individual risks and needs were addressed in their support plans. People's risk assessments were detailed, person-centred and promoted people's independence. One carer commented, "What was put together during assessment was an accurate reflection of [person] and their needs." People's risks around their specific health needs, mobility, skin and personal care, going out and their home environment were assessed.
- People's individual needs and risks were regularly reviewed. Scheme workers visited people and carers and supported those reviews. One carer said, "There are people I can phone straight away (if person's needs change)." Another carer commented, "If anything changes I send email or update (scheme worker). I would reach out to [scheme worker]. He is approachable, we have a good working relationship. He knows [person] and me very well."
- People were supported to take positive risks to build their skills and independence. For example, one person was supported to learn to travel independently with support of mobile travel applications and their shared lives carers.

Using medicines safely

- People received safe support with their medicines. Carers who supported people to take their medicines were trained to do so safely and completed medicines administration records when helping people. These records were then checked by the scheme workers to ensure people were receiving their medicines as prescribed.
- People's individual needs and risks around their medicines were clearly addressed in their support plans. People had individual medicines support assessments and profiles which included information around any allergies and preferences, level of support required by the person, as well as instructions for carers on safe storage, ordering and disposal of medicines.
- The provider had robust medicines management policy in place. People's support plans included information on any specialist needs and risks around their medicines.

Preventing and controlling infection

- People were protected from infections. The scheme supported carers to assess people's individual risks in relation to COVID-19 and other infection risks.
- Carers were trained in infection prevention and control and received support from the scheme around good practice. The scheme had supported carers throughout the COVID-19 pandemic to stay safe and well-informed of any changing risks.
- People were supported to take care of the hygiene and upkeep of their homes by shared lives carers. The level of support they required was assessed in their individual support plans.

Learning lessons when things go wrong

- The registered manager analysed all incidents and accidents and ensured action was taken to minimise risks to people and to implement any lessons learnt. For example, one person's support plan was updated following an incident to provide clearer guidance to their carers around how to safely support in similar situations.
- All incidents and accidents were recorded, reported and checked by management with lessons learnt being identified by the organisation and shared with staff.
- Lessons were learnt from carers' and people's feedback. For example, to enable carers to easily access important information, the scheme launched a carers portal which was made available to all carers as an online means of communication, sharing updates and useful information. Carers commented this provided with additional support and worked well.

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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The scheme had a positive, person-centred culture which supported people to have a good experience of care they were receiving. People and their relatives were complimentary about how the support provided by carers and scheme staff enabled them to build their skills and keep well.
- One person told us about their support, "It is good." A relative commented, "It is on the whole extremely positive. It is definitely the best environment for [person]. It provides us with more personal touch, [person] has her own family and got to know the carer." Another relative said shared lives arrangement supported their loved one to build their confidence and communication skills. They also said, "[Carers] have been very understanding. Everything works really well for us."
- Staff and carers found the scheme to be supportive. Comments from carers included, "We have very good communication which is really important. [The scheme] have support if you need it, a phone call away. It is brilliant for me."; "You are appreciated (as a carer), they really value you. They support and advise."; "[The registered manager is very good, charismatic and easy to relate to and passionate about what we do and seems to know everyone, seems to be well liked in her team."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The scheme had effective governance systems in place. One staff member told us, "There is support and monitoring which covers all sorts of things. We make sure all things are safe." Another staff member said, "Systems and the way we work is quite organised. We meet 3 times a week we have spreadsheets and logs send quiet a lot and [management] keep us up to date."
- The registered manager, deputy manager and provider completed a range of different audits and checks to ensure safety and quality of the support people received. Audits included, for example, checks of people's support plans, staff and carers training, provider audit of quality and safety. Staff regularly visited people's shared lives homes to meet with them and their carers.
- Action plans addressed improvement needs identified in the audits. We saw actions had already been completed or were assigned to staff for completion. Actions also included further improvement suggestions and were tailored to the needs of the people the scheme supported. For example, the scheme had dedicated staff supporting people living with learning disabilities and autism to cope with their individual challenges which improved people's quality of life. Carers were supported to attend specific training to

enable them to promptly recognise signs of people's health deteriorating which meant they could escalate any worries to appropriate healthcare professionals in a timely way.

- There was a clear management structure and oversight in the scheme. This supported carers and staff to understand their responsibilities. One carer commented, "I am quite happy with everything. I can contact [staff] anytime. They are very good if things change, they involve you straight away. They are pretty solid with their staff and you have continuity." A staff member said, "[The registered manager] is approachable and available. I have never worked with such a good manager; she really cares about you as an individual."
- The provider understood their responsibilities around duty of candour and worked in an open and transparent way. Where required, they also reported adverse events in the service externally, including to CQC.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and their relatives told us they felt involved and engaged in the service. People met their carers prior to accepting the arrangement and were encouraged to provide their feedback during regular staff visits. People's relatives also felt involved. One relative said, "I feel very comfortable approaching the carer who has been very flexible, so far so good. [The shared lives scheme team] have been very understanding and certainly, when I need or want to talk, I feel I can."
- Shared lives carers felt engaged, listened to and valued by the scheme. One carer said, "We get check-ups every so often. Any worries and ideas, I could speak up." Another carer said, "Shared lives are quite good in communicating with carers and are approachable, all very friendly people." The scheme provided carers with an opportunity to share their views via meetings, events and a survey which was in progress at the time of the inspection.
- Scheme staff felt appreciated and able to voice their suggestions, ideas and concerns. One staff member said, "I find it a really lovely team to work with. [The registered manager] is so diligent in what she asks of everybody. We do the maximum to support people, people are focus on what we do." Another staff said, "[The registered manager] had changed the whole ethos of who we are as a team. We always feel appreciated for the job we do."
- Staff worked well in partnership with others. The scheme was actively promoting the shared lives arrangements as an option of care and support for people and carers. They worked with the social services and existing carers to inform the local communities and to recruit new shared lives carers in the area.
- Staff worked well with a range of professionals, including social care and healthcare services, as well as community support organisations to ensure people could access support they needed. This included support for people and shared lives carers.