

SEA Recruitment Services Ltd

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Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Outstanding 

Is the service responsive?

Good 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service

SEA (Signing Enabling Access) Recruitment Services Ltd provides personal care and support for deaf people with other needs, such as a learning disability and/or autism, sight impairment or a physical health condition. SEA Recruitment provides support to people in their own homes, residential and care homes or hospitals. The service also provides support to seven people living at Beach House, a supported living home.

Not everyone who used the service received 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.

There were 31 people who received personal care as regulated by the Care Quality Commission (CQC) at the time of our inspection.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence.

People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People supported by SEA benefited from an outstandingly effective, caring and well-led service.

People received an exceptionally effective level of person-centred care and support, which led to positive outcomes and met their needs in a holistic way. The focus of people's support was to provide them with opportunities and become more independent. People's unique characteristics were not considered a barrier to their achievements. This was because the culture of the service was underpinned by the principles and values of Registering the Right Support and staff were able to communicate with people in the most effective way possible.

There was a well-defined inclusive culture and staff supported people to achieve life changing positive outcomes. Staff were motivated and passionate about making a difference to people's lives and helping them to achieve their goals.

Staff had a unique insight into people's care and support needs borne out of a genuine empathy for the people they supported. All staff used sign language to communicate with people all of who were non-

hearing. The service provided staff with training which was tailored for their needs as well as of those they supported.

People and their relatives had confidence in the staff who took care of them. People were matched with staff based on shared interests and personalities. We received extremely positive feedback about the service people received, comments focused on social inclusion, well-being and individualised care. Relatives were keen to tell us how staff went 'above and beyond' and always went the 'extra mile.'

People were supported in such a way that allowed them maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The registered managers adopted extremely innovative approaches which were effective at greatly enhancing the quality of the lives of people using the service.

Managers led by example and were integral in promoting a highly positive culture within the service which led to the delivery of tailor made care which was as unique as each person receiving it.

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

Rating at last inspection

At our last inspection, the service was rated "Good." (Report published September 2017).

Why we inspected

This was a planned inspection based on the rating of the last inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 safe?

Good 

The service was safe.

Details are in our safe findings below.

Is the service effective?

Outstanding 

The service was exceptionally effective.

Details are in our effective findings below.

Is the service caring?

Outstanding 

The service was exceptionally caring.

Details are in our caring findings below.

Is the service responsive?

Good 

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Outstanding 

The service was exceptionally well-led.

Details are in our well-led findings below.

SEA Recruitment Services Ltd

Detailed findings

Background to this inspection

The inspection

We carried out our inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. Our inspection checked whether the provider was 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.

We attended the provider's premises on the first day. Due to the Coronavirus outbreak, we were unable to return to the office or make home visits, so we reviewed documents and made telephone calls on the second day of the inspection.

Inspection team

The inspection was completed by one inspector. A qualified British Sign Language interpreter was used on the first day of our inspection to enable us to communicate with people and staff who were non hearing.

Service and service type

SEA (Signing Enabling Access) Recruitment Services Ltd provides care and support to people living in their own homes and 'supported living' accommodation so that 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.

The service had two managers registered with the Care Quality Commission. 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.

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 managers 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 sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service. We also spoke with the registered managers, three team leaders, two care staff and the training co-ordinator.

We reviewed a range of records. This included four people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, three care plans, minutes of meetings and accident and incident records. We spoke with five relatives to help us gain an insight into their loved ones experience of care and support. We also spoke with two professionals who regularly worked with the service.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection 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 and their relatives told us they felt the care received by staff was safe. One person told us, "Yes, I feel safe with staff." A relative commented, "[Loved one] receives safe care and support."
- Staff received safeguarding training and had access to a whistleblowing policy. Staff understood how to safeguard people from abuse and how to report any safeguarding concerns.
- The registered manager sent us statutory notifications to inform us of any events that placed people at risk of harm.

Assessing risk, safety monitoring and management

- Individual risk assessments were carried out for each person and included health, safety and environmental risks. Control measures were in place providing staff with guidance on how to mitigate any identified risks to people.
- A positive attitude was taken to managing risks. Risks to people were mitigated whilst still respecting their choice and freedom.

Staffing and recruitment

- People were generally supported on a one to one basis. There were enough numbers of staff to provide people with safe and, consistent care and support.
- People received care and support by staff who were familiar with their individual needs, preferences and routines.
- Full pre-employment checks were completed to help ensure staff members were safe to work with vulnerable people.

Using medicines safely

- Medicines were managed safely. Medication was administered by staff who were trained to do so.
- Wherever possible, people were supported to manage their own medication independently.

Preventing and controlling infection

- Staff received training in infection prevention and control and followed good practice guidance.

Learning lessons when things go wrong

- Incidents and accidents were reviewed by the registered manager to identify any themes and trends. This helped to prevent reoccurrence in the future.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Outstanding. At this inspection this key question has remained the same. This meant people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The staff's ability to communicate with people was integral to identifying their needs and choices and had profoundly positive effects on people's well-being. For people who did not use British Sign Language (BSL), staff offered guidance and had supported one person's relatives to communicate effectively with the person. This greater communication had led to the person gaining the confidence to invite their relatives to their home each month for a meal. This support empowered the person to maintain meaningful family relationships.
- Staff's communication skills were also key in identifying people's goals and aspirations. The commitment and understanding staff had towards each person was instrumental in helping people make progress and achieve their own goals and aspirations. People's lives had significantly improved as a result.
- The service had an exceptionally holistic approach to assessing, planning and delivering care and support, underpinned by strong leadership, aligned with best practice guidance. People were empowered to direct their own care and support needs. People had a say in what staff they wanted to support them and were matched to their staff support team on the basis of personality, needs, culture and religion. Relatives we spoke with echoed our findings that the service was extremely effective for their loved ones. Comments included, "Staff absolutely go above and beyond for [loved one], they always go the extra mile" and "The carers are non-hearing like [loved one], this gives them a far greater understanding of their needs, it's a real bonus."

Supporting people to eat and drink enough to maintain a balanced diet

- Positive staff relationships and innovative methods were pivotal in promoting people to eat and drink well. Staff educated and encouraged people to make nutritious food choices. Staff presented information around food options in a way they understood, for example, by using pictures and signs to help people make informed choices. People were supported to shop for ingredients and prepare meals which helped develop their independence and life skills.
- As a direct result of staff support, one person started using a gym and attended weekly slimming world and weigh in sessions. Staff also assisted the person to prepare and cook slimming world meals. This had a positive impact on the person's physical health by increasing their mobility and their psychological well-being.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- Staff worked hard to build up relationships of trust with people leading to positive health outcomes. This

empowered people to access health care services they ordinarily wouldn't have had the confidence to access. Staff supported people attend external appointments which was paramount to people voicing their own health care choices. A relative told us, "[Loved one's] life has changed for the better since having SEA onboard, good communication is absolutely key and [loved one's] mental well-being has dramatically benefited as a result."

- Staff's exceptional knowledge of the person enabled health professionals to design the best treatment for them. People were supported to access appropriate health services in a timely way to ensure their health and well-being needs were met. A health care professional told us, "The service works in a conjoined way and is completely bespoke to meeting the needs of people."
- The service helped bridge the gap between the person and health care services which led people to experience an outstanding quality of life. One person was supported by staff to access a community rehabilitation service. As a result, the person was able to successfully transition back into the community. Staff continued to offer support and helped the person reconnect with their family which increased the person's self worth. Staff provided the person with regular informal counselling which led to the person leading a more active and healthier lifestyle.

Adapting service, design, decoration to meet people's needs

- Wherever possible, staff supported people to live a more independent life, in line with the 'Registering the Right Support' guidance of people living a life as ordinary as any citizen. Staff supported one person to research new flats to rent, attend property viewings and move into a new flat of their choice. The person was assisted to decorate and furnish the flat to a design of their choosing, care was taken to design the flat in such a way as to maximise the person's independence.

Staff support: induction, training, skills and experience

- Effective communication led to personalised care and support which embraced people's choices and resulted in positive outcomes for people. Staff were recruited with skills, such as British Sign Language, that reflected the primary needs of the people using the service. Staff received a high standard of training to ensure they had the skills and competence to support people in the most effective way. Training was developed and delivered around individual the needs of both people and staff. A team leader told us, "Training is matched and adapted, we promote a flexible way of working to align with our core values."
- People felt understood by their support team. Staff had an intrinsic knowledge of the specific needs of the people they supported and had developed their understanding of the needs of people living with hearing loss and vision impairments by attending awareness courses. Staff told us this bespoke approach to training had improved their understanding and helped them to explore different ways to support people leading to more positive outcomes. A health professional told us how they were "so impressed with the skills of the staff, their values and empathy they have for the people they support."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (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 to receive care and treatment when this is in their best interests and legally authorised under the MCA.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can

authorise deprivations of liberty.

- People's hearing or visual impairments were not considered as a barrier in ensuring people were fully involved in decisions about their care and support. Presentation of information to people in a way they could understand, enabled people to make informed choices. Where best interest decisions were made, the service worked in conjunction with relevant others such as health care professionals and family members to reach a decision which was best aligned with the person's wishes.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has improved to outstanding. This meant that people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff were exceptionally motivated and compassionate about ensuring people were well treated and supported. Staff went 'above and beyond' to ensure care was just right for people. We heard how staff had taken a person's laundry to their own home to wash when their washing machine broke down and how staff cooked and delivered Christmas dinner to people in their own time. Feedback from service users and their relatives was overwhelmingly positive with people telling us that the service's intervention was often life changing. One person told us, "I have the same staff – they are very good. So happy with them. They know my needs and preferences, whatever I need I can tell them." Relatives told us, "They [the service] have simply transformed the life of [loved one] for the better, I didn't think it was possible" and "Staff go above and beyond, they are just brilliant."
- Staffs' commitment to nurture, care and support had extremely positive effects on people's happiness and well-being. Staff helped one person celebrate a milestone birthday by organising a collection amongst themselves and arranging for gifts to be given to the person. They also hosted a buffet party and birthday cake to help them celebrate. The event was an emotional experience for all who attended, as the person communicated that they had no previous memories of birthday celebrations.
- The service was adept at catering for the needs of the diverse groups of people they supported. Staff worked with sensitivity towards reducing any social inequalities people faced, and their characteristics were not regarded as a barrier to any potential achievements. Staff promoted inclusivity and people's diversity was celebrated. The service held an Indian cooking event involving people and staff cooking Indian cuisine. Information about Hindu culture, celebrations, food and beverage consumption was shared, and examples provided of the differences compared to other cultures. The registered manager told us, "All participants thoroughly enjoyed the event. By the end we all had a greater understanding of Hindu culture and cultural needs, which is a good outcome all round."

Supporting people to express their views and be involved in making decisions about their care

- Staff were exceptionally skilled at communicating with people in a way they understood which not only greatly enhance people's quality of life, but also their emotional well-being. Most staff lived with hearing loss themselves and had genuine understanding and empathy for the people they cared for. A relative told us, "SEA has by far made the biggest difference to [loved one's] life, they are now a more calm, appreciative and happier person, without SEA, [loved one] would be living a far different life."
- Staff were tenacious in empowering people to be fully involved in choices around their care and support. Information was provided to people in a way they could understand which ensured people were given the right support to make decisions. Positive approaches to risk assessments were taken and staff went over

and above to make it happen for people. Staff told us they never told a person they couldn't do something, instead, they moved mountains to make their dreams a reality. One relative commented, "The staff simply go above and beyond what they should be doing, and that has changed quality of [loved one's] life for the better."

- People were encouraged to express their views and staff were committed to realise people's goals. One person was supported to organise their own birthday celebrations, involving their family and local community members, and choosing their own venue. Staff helped the person to look amazing for their birthday celebrations, this meant a great deal to the person who greatly enjoyed reminiscing by looking at photographs taken at the event.
- Staff demonstrated great innovation in adapting care and support, often in challenging circumstances, to ensure peoples' wishes were fulfilled. One person became distressed at being unable to leave home due to the coronavirus restrictions. The person expressed they wanted to wish their support staff a happy birthday. Staff made a BSL video showing the person's birthday message being passed to the person's support staff. The video was then shown to the person who was completely overjoyed that their wishes had been granted.
- For people who had no family or friends to speak on their behalf, the service had details of an independent advocacy service. An advocate helps to ensure that the views and wishes of the person are conveyed.

Respecting and promoting people's privacy, dignity and independence

- The core values of dignity and respect were cornerstones of the service and underpinned any intervention and interaction carried out by staff. Staff valued each person's self-worth and supported people to take control over their life and be as independent as possible. People's needs meant they relied on staff for much of their communication, physical, psychological and social needs. Because people were able to choose their own staff team, staff were often able to anticipate people's needs and so support people with consideration, sensitivity and dignity.
- Staff placed great emphasis on empowering people to take control of even the smallest of tasks and respected their choices, whilst both promoting and maintaining people's independence. Following an accident, one person was unable to leave their home which effected personal care and self-grooming. The person was reluctant to accept support with this and their hair became overgrown. Staff arranged for a top stylist to visit the person at their home where they participated in role play to illustrate haircut and grooming. Staff taught the stylist some basic BSL so that they were able to communicate with the person direct. The person responded positively and interacted with the stylist with whom they now have regular haircuts. The person now takes great pride in their appearance and enjoys having their hair styled.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people's needs were met through good organisation and delivery.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The service engaged people in activities which were individualised to them. Staff understood the importance of knowing a person's background in relation to providing truly individualised and person-centred care.
- Staff had an exceptional understanding of people's support and behaviours because of the specific ways of communicating with people which was unique to them. This led to a direct involvement in making things happen for people.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were at the heart of any care and support plans and their individual wishes, needs and choices were considered. Emphasis was placed on support being given in the least restrictive way and from the person's perspective. Care records contained detailed information about people's preferences in relation to their support and treatment, their history and background. Care and support plans were not just used as a formal record of people's care needs but as an invaluable tool which enabled staff to care for people in the most responsive way possible.
- A re-assessment of people's needs was regularly undertaken to ensure that any changes in their needs and goals were identified and planned for. Wherever possible, the person and/or their relatives were involved in this process to ensure that care was delivered from the person's perspective and in line with their wishes.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff supported people who required assistance with reading or completing paperwork in relation to their care and support. Guidance on how best to communicate with the person was recorded in their care plan.
- Important information such as people's care plans and the complaints policy was provided in alternative formats to ensure each person's understanding.

Improving care quality in response to complaints or concerns

- There was an appropriate complaints management system in place. The complaints policy was presented to people in a way they could understand. One person told us, "I can contact the manager if I have any issues by phone, email, signed video, I am very happy with the process."

- The registered managers considered any complaints received and used them as opportunities to further improve the service.

End of life care

- The service was not supporting anyone with end of life care at the time of the inspection. Staff had received training and worked in conjunction with other healthcare professionals to ensure people received dignified end of life care and support.

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 good. At this inspection this key question has improved to outstanding. This meant the service was exceptional and distinctive. Leaders and the culture they created drove and improved high-quality, person-centred care.

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

- The mission of the service was for every person to receive the highest quality person-centred care and support, that met their needs, wishes and choices. There was a feeling at this service of empowerment. This was echoed by the positive feedback received by people, relatives and staff. Staff treated their roles with passion and professionalism whilst simultaneously embracing the core values of the service. A relative told us, "There's an excellent culture, [loved one] is genuinely able to express their views and feedback, the leadership and care team are adapted when needed to meet [loved] one's needs."
- The service's outstandingly caring attitude and effectiveness were borne out of distinctive and exceptional leadership. There was a clear strategy in place to deliver the best possible care and achieve the best outcomes for people. The bedrock of the service's ethos was effective communication, which empowered people to live a fulfilled life, crucially because people were supported to express their views and were understood by the staff supporting them. A health care professional told us, "It's a fantastic service completely bespoke to the needs of its people."
- The managers didn't just attempt to teach staff their values but were admirable in leading by example. At Christmas, one of the managers and staff team dressed up as 'deaf elves' and visited children who used the service and their families. The deaf elves signed Christmas songs in BSL to the children and handed out gifts. Both staff involved and the children's families reported how wonderful it was to see the children's faces light up with excitement. The deaf elves also visited individual adult clients that they thought would benefit from the festive visit.

Working in partnership with others

- The service worked tirelessly to further enhance the quality of care for the people it supported. The registered managers had developed relationships with external organisations to not only help provide high quality support for people, but to increase deaf awareness within the wider community, and act as an excellent role model for other services. The service provided training with SENSE and Deaf Active, including 'DeafBlind Intervenor training.' This specialized training developed people's awareness of the needs of people living with a hearing and vision loss and led to enhanced and more empathetic levels of care and support. One of the registered managers had set up a social work specialist forum attended by local authority and voluntary sector social workers across the area which had further increased awareness of people's needs.
- To further improve people's experience of using the service and to ensure people were supported in ways they themselves defined, the registered manager met with external agencies to share learning, facilitate best

practice, challenge barriers and assist an exchange of learning. The service worked closely with other deaf providers and set up a working forum with other deaf organisations. One collaboration focused on the access requirements of deaf staff and the Access to Work scheme, which was designed to help empower deaf people get into paid employment, and ensure that deaf people had access to sign language interpreters in the workplace.'

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service placed a strong emphasis on people's mental well-being and their right to express their views and have those views understood and acted upon. Strong links had been forged with external agencies such as clinical psychologists, mental health services and community and advocacy services. The service worked collaboratively with mainstream services and deaf specialist community groups to ensure people were an integral part of essential support groups and a part of their community. A health care professional shared, "The [service's] conjoined level of working is absolutely brilliant."
- People were strongly encouraged to put their opinions and views forward. Both resident and staff meetings were held as an additional way of obtaining people's feedback. People's feedback had been directly acted on, such as empowering people living in the supported living accommodation to take an active role in health and safety checks and become designated fire marshals.

Continuous learning and improving care

- Regular reviews were held by senior members of staff and were designed to sustain an outstanding level of care which was unique to every person. People had a say in the running of the service and were consulted about any planned changes. During processes to improve the environment of Beach House through planned improvements, the service continually consulted with people and their families regarding the changes.
- The service was committed to involving clients in defining their own outcomes for their care. To help support this, innovative technology had been introduced to translate people's support plans and risk assessments into BSL and visual formats to better aid their understanding.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The managers were strongly committed to assuring the delivery of high-quality person centered care and practiced a leadership style which was honed towards quality performance and best practice. A designated Quality Monitoring Officer oversaw quality issues such as audits, staff and service user feedback. The service learned and improve by analysing both at a micro level, such as if there is a concern raised which identifies that staff need further training and at a macro level, what the organization needed to do to improve. A quarterly analysis was completed to inform service improvements and trends or patterns.
- The service was keen to develop the skills and knowledge of its staff to further enhance the quality of care people received. Managers not only developed their own leadership skills but those of their staff. Workshops for the management team were held on various topics such as staff performance, quality monitoring and CQC standards. The service aimed for all managers to gain external qualifications in Leadership and Management.
- The managers demonstrated transparency and honesty in the running of the service and were well respected by people, relatives and staff. A member of staff commented, "Managers are always available. I can make suggestions and feel listened to. There is a good manager structure, good culture and good communication, there are no barriers here with communication."

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

- The management team held regular meetings and discussed any incidents and complaints. This helped to further drive the quality of the service.
- The registered managers submitted any required notifications to CQC in a timely way.