

Transform Residential Limited

Freeman College

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?	Outstanding 🌣
Is the service well-led?	Good

Summary of findings

Overall summary

About the service:

Freeman College provides accommodation and personal care for students between the ages of 16 and 25 with complex learning and behavioural difficulties, who are also in the education sector. Residential students live in team houses in the local community. There were six students living in these houses at the time of the inspection. Two students were living in share lives placements.

This service provides care and support to students living in 'supported living' settings, so that they can live in their own home 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.

People's experience of using this service:

The service was exceptional at ensuring students were at the heart of the service and its values. Its vision was very clear and it had a strong person-centred ethos to promote the independence of students, empowering them and supporting them to achieve outcomes. Staff and documentation exhibited this. Holistic support plans were very detailed and written from the students' perspective.

Students were supported to express their views and have choice over all aspects of their daily lives. Students were supported to make decisions and documents showed how decisions were led, considered and reached by students.

Students' independence was paramount and relatives spoke highly of how this was encouraged and enabled. Students' privacy and dignity was respected.

Students were safe.

There was a robust safeguarding system in place; students and staff were aware of the procedure and how to raise concerns.

Positive risk assessments were in place which supported students to develop and maintain their independence whilst keeping them safe.

Students' needs and choices were assessed according to their wishes and outcomes were monitored to ensure students get the level of support they need.

Staff were generally well-trained, however there were some staff who had not had up-to-date training in line with provider policies.

Students' nutritional health was monitored and they were encouraged and supported to eat healthily; growing much of their own vegetables.

Consent was asked and recorded for all aspects of students' lives; staff were knowledgeable about the Mental Capacity Act and its principles.

Concerns and complaints were monitored and action taken when appropriate.

Rating at last inspection:

At our last inspection the service was rated good (11 November 2016).

Why we inspected:

This inspection was part of our scheduled plan of visiting services to check the safety and quality of care people receive.

Follow up:

We will continue to monitor information and intelligence we receive about the service to ensure care remains safe and of good quality. We will return to re-inspect in line with our inspection timescales for good services, however if any information of concern is received, we may inspect sooner.

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

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 remained Good.

Details are in our Safe findings below.

Is the service effective?

The service remained Good.

Details are in our Effective findings below.

Is the service caring?

Good

The service remained Good.

Details are in our Caring findings below.

Is the service responsive? Outstandi	ng 🛱
The service improved to Outstanding.	
Details are in our Responsive findings below.	
Is the service well-led?	od •
The service remained Good.	
Details are in our Well-Led findings below.	



Freeman College

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by an adult social care inspector and an assistant adult social care inspector.

Service and service type:

Freeman College is a specialist residential college. The service is registered to provide care and support for up to 10 students living in small 'team houses'. CQC regulates both the premises and the care provided, and both were looked at during this inspection. The service is also registered to provide personal care to young people living with shared lives carers. The educational provision at the college is regulated by the Office for Standards in Education (OfSTED).

The service had a manager 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 visit we needed to be sure that they would be in. Inspection site visit activity took place on 9 May 2019 when we visited the office to see the registered manager, staff and students and to review care records, policies and procedures. We spoke to relatives on 14 May 2019.

What we did:

Our inspection was informed by evidence we already held about the service. We also checked for feedback from the local authority and other stakeholders. Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We spoke with three students who use the service and three of their relatives. We spoke with the registered manager, the deputy manager, the safeguarding and training officers, and two support workers. We reviewed four student's care records in full as well as various parts of two other student's care plans, five staff personnel files, audits and other records about the management of the service.



Is the service safe?

Our findings

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

Good: ☐ People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- There was a robust safeguarding system in place. Regular reports considering trends and themes were produced and used to develop further training and awareness.
- •□Staff and students knew about the safeguarding processes and were confident designated safeguarding officers would take appropriate action. Staff confirmed they received a response from the safeguarding officers so they knew any concerns had been received.
- •□A student told us, "They (staff) told me about how to lock doors."
- •□A relative said, "[Name of person] feels safe and happy, feels more positive".

Assessing risk, safety monitoring and management

- •□Risks were assessed and colour-coded with risk categories, risk mediation and risk management are all considered and recorded. Risks were managed in a positive way.
- •□A risk assessment summary provided a snap-shot of any risks which would potentially inhibit independence to ensure this was mitigated against; this was updated as and when required.
- Staff were knowledgeable about the checks they undertook to keep student's environment safe, for example, undertaking fire safety checks and carbon monoxide checks each week.

Staffing and recruitment

- Staffing rotas we saw provided a consistency of care for students.
- Staff confirmed staffing levels were good.
- Due to fluctuating student numbers agency workers were used however these were consistent and continuity of care was provided for students. The registered manager told us bank staff recruitment had taken place to provide greater flexibility to meet the needs of students when numbers fluctuated.
- Recruitment processes were extremely thorough and pre-employment checks were robust. This showed only fit and proper applicants were offered roles. Checks included asking for a full employment history, verifying references and obtaining criminal records checks, including from periods where people had lived overseas.

Using medicines safely

- Medicines systems were organised and students received their medicines when they should.
- Good procedures were in place to support students to be independent, where possible, with their medicines, whilst maintaining their safety.
- •□Staff knew what procedures to follow to administer medicines safely. They confirmed the procedure to take in the event of medicine errors.
- We found the recording of medicines stock levels did not always identify when medicines had been

received from relatives or had been taken by relatives. We discussed this with the registered manager who made arrangements for a new clearer process of recording.

Preventing and controlling infection

- Staff had been trained on infection control; this was refreshed regularly and was up to date.
- •□Staff had good access to personal protective equipment and described the process for replenishing these.
- Staff described how the service had a policy of using eco products so all products were safe.

Learning lessons when things go wrong

- •□Accidents and incidents were recorded and monitored. Each incident was reviewed by one of a team of specially trained designated safeguarding officers. Actions taken and consideration to mitigate future risks were recorded.
- The management team reviewed all the accidents and incidents each month, an analysis to identify trends and themes had been undertaken.
- Management encouraged staff to report accidents and incidents using the electronic recording system; this was regularly updated with actions and provided an audit trail of follow up actions taken.



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

Good: ☐ People's outcomes were consistently good, and people's feedback confirmed this.

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

- Assessments of students' needs included discussions with the student, their relatives and other professionals.
- Holistic support plans contained very detailed information about students' care and support needs. These were reviewed as and when changes occurred.
- •□ Relative's told us staff knew students very well.
- The provider recognised the importance of ensuring students' care and support was delivered in line with current good practice guidance. The service had recently created and recruited to the role of holistic engagement worker which supported this practice.
- The service used an electronic recording system (databridge) which ensured identified changes to students' holistic support plans were accurately tracked and recorded.

Staff support: induction, training, skills and experience

- •□Staff received an induction and were provided with information, training and shadowing. A staff member confirmed their induction was "thorough".
- •□A relative told us, "From the very first day staff knew how to work with [name of person]."
- •□Students were supported by staff who had ongoing training, however we found in some instances staff had not undertaken mandatory re-training as specified by the provider and some new staff had not completed all their mandatory training. Whilst this had not impacted on the delivery of quality care, we were not assured monitoring of training was robust. The training officer told us there were plans for line managers to monitor this however this was not in place at the time of the inspection.
- Staff received support through regular supervisions and personal development reviews.

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

- Healthy food formed part of the college ethos and students were encouraged to grow and harvest biodynamic food at the college's market garden. Biodynamic is an organic and holistic way of farming.
- ☐ Food intake was monitored and recorded.
- Students were supported with their eating habits and lifestyle choices and were encouraged to respect others' food choices.
- •□A student told us, "I have dietary requirements but I could help myself to the foods I could eat."

Staff working with other agencies to provide consistent, effective, timely care

- Pre-assessments were undertaken in conjunction with other professionals involved in students care.
- •□A relative described how they had been included in advice from speech and language therapists to

support a consistent and holistic approach for their relative.

- Another relative explained how staff continued physiotherapy exercises for their relative, as well as supporting them to appointments.
- •□Support and college staff worked together to provide a consistent approach. Staff described how handover meetings, handover reports and communication books were used to facilitate this.

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

- •□Student meetings took place every week in each team house. Students were able to discuss and agree shopping, laundry and cleaning days.
- Students also chose how they spent their free time in the team houses. One student asked for more herb plants to grow, another talked about the importance of writing targets on the whiteboard.

Supporting people to live healthier lives, access healthcare services and support

- Holistic support plans included a section called 'health and wellbeing'. This documented whether students take medication, why and at what time, as well as explaining the strategies which could be needed to support someone if they were unwell.
- Students also had a health action plan, and staff told us these were used, however in one student's file this had not been completed.
- •□Staff described how they ensure continuity care and monitor student's well-being, detailed information was recorded about all aspects of a student's health.
- •□One student had asked to see the doctor and we saw this had been done immediately, and GP advice recorded.

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).
- We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised, and whether any conditions on such authorisations were being met and found that it was.
- ☐ Students' consent to care was accurately recorded.
- Staff were confident in their knowledge about mental capacity. One staff member said, "Due to training we are very up to date with this, they can take positive risks and support them through bad choices".



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

Good: ☐ People were supported and treated with dignity and respect; and involved as partners in their care.

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

- •□Students and relatives provided consistently positive feedback about staff. A student told us "They (staff) are nice and kind", another student said, "Staff were kind." A relative said, "[Name of person] absolutely loves the staff." Another relative said, "Absolutely amazing, I can't speak highly enough."
- •□A staff member told us, "We have three years to prepare them (students) for life." Another staff member explained the importance of "building the support plan around the individual". Another staff member explained how students were supported with identity issues.

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

- Students and relatives confirmed they were involved in making decisions about their care and support.
- Holistic support plans documented students' involvement and also when students had chosen not to be involved.
- \Box A staff member explained the process for supporting a student to prepare to leave the college; they told us, "Conversations will be had with the student and family, they are very active with the transition, they're part of the process."
- $\bullet \Box A$ staff member confirmed, "Yes, [they] definitely have input, they can read what has been written about them, they can give feedback, we respect that".

Respecting and promoting people's privacy, dignity and independence

- Staff described how they preserved students' dignity. A staff member explained, "Knocking on doors, always promoting independence".
- Another staff member described how a student had been supported to form a relationship, even though staff observations suggested this may be difficult.
- Student comments included, "they support me to be independent and that's what is important to me", and, "they respect my alone time". A relative said, "It's very much about promoting independence".

Is the service responsive?

Our findings

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

Outstanding: Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Comprehensive assessments took place involving discussions with students, their families, and, where appropriate, involved professionals to ensure the college was able to meet students' needs, preferences and interests with the right level of support in place.
- •□Staff developed innovative ways to provide the right support, for example, agreeing with students where they wished to use non-verbal signals to express their moods. This meant students felt secure about expressing themselves in the best way for them.
- Individual holistic support plans were produced in conjunction with students. These were detailed and person-centred; the first part was called "It's all about me, making my support ME shaped!" and included things like "what I would like you to know first", "what it's essential you know always" and "what I want from my future". Students had clearly fully participated by, for example, drawing diagrams and pictures to show the things they enjoyed. These were described in language pertinent to each student.
- •□Students were encouraged to write on their holistic support plans to support their full input into their care and support. In one instance a student had disagreed with the support plan and had ripped this up, staff supported this and encouraged the student to write another which better reflected the support the student preferred.
- Holistic support plans identified people's communication needs, and also the best method to communicate with those people who were important to students. Staff were knowledgeable and skilled in communication with students in their preferred manner.
- •□A section of the plans detailed who was important to students, why and how students liked to communicate with them. A relative described how their relative often phoned them when feeling anxious and the relative would then encourage them to talk to staff. This intervention had been agreed by the student and all involved.
- •□Students were encouraged to maintain family contacts and families were able to visit whenever they liked. A relative told us they would be visiting for their relative's birthday and because the student liked to keep their shared housing as their 'own space' staff had facilitated alternative arrangements to suit the student and their family.
- •□Staff had an excellent understanding of each individual student and the registered manager described how they matched staff skills to student's needs and personalities. Students were involved in choosing the staff to support them.
- •□Staff explained how they supported people's preferences and beliefs. For example, how they accommodated a student's preference to eat meat when other students and staff in the house were vegetarian.
- Without exception all the relatives we spoke with were very positive and overwhelming described how students' choice was a priority. For example, one student was supported to move house and their relative

described the choice as a positive process with full involvement with the student and their family.

- □ A relative explained how, due to a health issue, the college had accepted their relative part-time and said, "They (staff) support [name of person] when he needs to go home or have a rest". This provided continuity of support to the student enabling them to continue their independent journey with the college and staff.
- □ A staff member described a student who was starting a relationship but who needed 2:1 support whilst in the community. Staff worked with the student and managers to promote privacy and choice for the student during this relationship. Staff discussed with managers and developed a positive risk assessment with the student to allow support and freedom for the student in a respectful way.
- Daily records showed a clear and direct link to students' holistic support plans, showing staff had an excellent understanding of the intricacies of students' support needs. For example, one plan suggested staff provided frequent breaks whilst talking with a student, to give them space and encourage their involvement: daily records detailed how this had taken place.
- The college was creative and innovative in supporting people to live an independent and full life. For example, students were encouraged to participate in hobbies and join groups. A relative said, "[name of person] has joined a youth club and climbing group, they wouldn't have done that at home". Another student was supported to participate in cycle rides, we saw they had been supported to check their cycle safely and were learning cycling proficiency. Daily records showed how this had supported the students emotional mood and well-being.
- One student described how they were setting up their own business after they left the college, explaining how staff had supported their independence and decision-making to do this.
- •□Students completed a weekly summary to show progress against outcomes. This tracked progress so staff and students were clear about next steps and how achieving outcomes could be alternatively achieved. Where students had chosen not to complete this it is documented and explained why.

Improving care quality in response to complaints or concerns

- The provider supported a four-stage complaints procedure, and their policy detailed the action taken at each stage.
- Complaints and concerns were recorded, monitored and responded to within provider policy guidelines. Learning took place as a result to avoid any repetition.
- •□A staff member explained, "We have core teams to working with a student, implement plans in place to help the student go through the issue, meet with them and explain the issue with them and how we can work through it. It's motivating for the person involved students voice is the most."

End of life care and support

•□There was no one receiving end of life care at the time of our inspection.

Accessible Information Standard: The registered provider provided information in an accessible format to meet student needs. During the inspection we saw examples where a written document also had a corresponding easy read document.



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

Good: ☐ The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- •□There was a registered manager in post. The registered manager had been registered since 11 December 2015.
- There was a strong ethos of delivering high quality care and support. Staff were able to describe how this was delivered.
- •□Students, relatives and staff confirmed they knew who the managers were and that they were approachable. A relative confirmed, "They are very approachable, they do home visits, they always phone me back".
- •□Staff told us they felt listened to and staff morale was good.
- The registered manager acted according to duty of candour requirements.

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

- The registered manager was clear about their responsibilities and those of their staff.
- Governance arrangements were in place to check the quality and safety of care provided.
- The service had produced a new cycle of quality audits however we found food temperature checks were sporadic and these had not been identified or action taken. We discussed this with the registered manager who made arrangements for this to be followed up.
- It was not clear whether some essential maintenance work had been completed, and this had not been followed up. We brought this to the attention of the registered manager who confirmed this had been completed and there had been no detriment to student safety.

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

- The registered manager and their deputy had an open-door policy and students, relatives and staff confirmed this.
- Staff facilitated regular meetings for students about all aspects of their care and support.
- Regular staff meetings include staff feedback where they discussed any changes and what's working well.
- •□Staff described how the new house team meetings had benefitted communication for everyone, meaning staff and students were more actively involved in the college.
- •□One staff member commented, "We receive a varied response from the management team, there is pressure to complete paperwork stuff."

Continuous learning and improving care

- •□The service had an improvement plan which detailed plans and identified actions taken. This was used to improve the service.
- •□Ideas that worked well were shared across the service.

Working in partnership with others

- •□Staff confirmed they worked well as a team.
- The registered manager described their involvement with peers within the provider organisation and in external groups. Ideas and best practices were shared across the service.
- •□Relatives told us how staff had worked with the whole family to develop strategies to support students, a relative said "it's a really big thing for us".
- Students were encouraged to be involved and active in the community.