

Ms Louisa Margaret Barreto-Lyons

N-Able Support Services

Inspection report

54 St James Street
Baltic Triangle
Liverpool
Merseyside
L1 0AB

Tel: 01517068140

Date of inspection visit:
18 April 2019
24 May 2019

Date of publication:
18 June 2019

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?

Requires Improvement ●

Summary of findings

Overall summary

About the service: N Able Support Services is a service providing care and support to people in their own home. At the time of the inspection the service was providing support to one person.

People's experience of using this service:

We could not make contact with the service on several occasions when we rang and left messages. This means that we could not always effectively monitor the service. People supported by the service were always able to contact the provider and staff. The provider has informed us that they intend to update their contact details.

Records were all in place and up to date. At times these were brief and did not reflect the service being provided. We discussed with the provider the benefits of keeping more comprehensive records.

People were protected from abuse and harm. Staff had a good knowledge of how to support people safely and well and how to implement this on a person centred basis.

Sufficient experienced staff were always available to support people. New staff were well supported by senior staff and safe recruitment practices were followed. Staff received the training they needed to support people safely and well.

People received the support they needed, in a way they preferred with their personal care, health care, medication and social lives.

Staff supported people to make choices in their daily lives and respected the fact that they were working in someone's home. Staff had built good relationships with people supported and knew them very well.

Clear information was given to people about how to raise a concern or complaint and robust processes were in place to investigate any concerns raised.

Senior staff had a good knowledge of the service provided and spent a lot of time quality assuring the service and supporting staff to carry out their role well.

Rating at last inspection: Good (14 December 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information 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 safe.

Details are in our Safe findings below.

Is the service effective?

Good ●

The service remained effective.

Details are in our Effective findings below

Is the service caring?

Good ●

The service remained caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service remained responsive.

Details are in our Responsive findings below.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our Well-Led findings below.

N-Able Support Services

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.

Service and service type:

This service is a domiciliary care agency. It provides personal care to people living in their own home. It provides a service to adults who have a range of disabilities or support needs.

Notice of inspection:

We intended to give the service 48 hours' notice of the inspection but were unable to contact the provider on several occasions. Therefore, the provider had a number of weeks' notice of their inspection.

Inspection site visit activity started on 18 April 2019 and ended on 24 May 2019. We visited the office location on 18 April 2019, we were unable to gain access on that date. We arranged to visit the office on 24 May 2019 to see the provider and review care records and policies and procedures.

What we did:

During the inspection we met with the provider and the person who used the service. We also spoke on the telephone with three members of staff.

We looked at records including those related to recruitment and training of staff, audits, medication and care plans.

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

- Staff and the provider were aware of safeguarding adults' procedures. They had access to relevant phone numbers and polices and told us they would not hesitate to raise any concerns they had.

Assessing risk, safety monitoring and management

- Staff had a good understanding of emergencies that may occur and how to react in a way that kept everyone safe.
- Risks to individuals and general risks were assessed and risk assessments were in place to minimise these.
- Staff told us they could and did call on senior staff for support or advice and this was always available.

Staffing and recruitment

- Robust systems were in place and followed for recruiting staff. This helped to ensure staff were suitable to support people who may be vulnerable.
- There were sufficient, skilled and experienced staff available to provide the support people required.

Using medicines safely

- Staff knew how to support people safely with their medication.
- Clear records of medication staff had administered were in place. Medication was stored safely by staff.

Preventing and controlling infection

- Infection control procedures were in place and followed to minimise the risk of cross infection.
- Staff told us they always had access to cleaning products and disposable aprons and gloves if needed. We saw these were available when we visited one person in their own home.

Learning lessons when things go wrong

- Systems were in place for recording any accidents or incidents that may occur and reviewing them for any lessons that could be learnt.

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; and staff working with other agencies to provide consistent, effective, timely care.

- People's care and support needs were regularly reviewed and plans implemented to provide the support the person needed.
- Care records provided brief information on how to support the person safely and effectively. This included supporting the person with maintaining their social life as well as with their health and personal care needs. We discussed with the provider including more information in care records in future to support any newer staff members.
- Staff liaised when needed with other professionals to support the person and help them implement any advice given.

Staff support: induction, training, skills and experience.

- Records showed that new staff received a thorough induction to the service and the person they would be supporting. Staff confirmed that they spent a week shadowing experienced staff before supporting someone on their own. Extra support and supervision was put into place for new staff during their first few months.
- Staff told us they received the training they needed to support people safely and effectively. Records of training generally confirmed this. Not all of the training staff had undertaken was clearly recorded, we discussed with the provider the benefits of recording all training and awareness sessions staff undertook.
- Staff received support through regular supervisions with senior staff and staff meetings.

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

- One person told us that staff helped them to choose their meals and then made them for them.
- Staff knew about any special dietary requirements the person they supported had and how to meet these.
- People received support to maintain a record of their diet and to discuss this with health professionals when needed.

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

- The office was in Liverpool town centre and accessible via public transport. Facilities available included access to adapted toilets, a lift and larger rooms that could accommodate people using a wheelchair if needed.

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

- Staff told us that they supported people to attend healthcare appointments if needed and records confirmed this.

- Staff also told us that if the person they supported was in hospital they continued to provide support to them.
- Records showed that people were supported to monitor their health and seek advice if any concerns rose.

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. 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.

- At the time of the inspection no person using the service had any restrictions placed on their liberty.
- Staff had a good understanding of people's right to make decisions and how to support them to do so. One member of staff explained, "sometimes I ask in different ways to get to bottom of it".

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.

- We asked a person using the service what their staff team were like and they told us, "I love them."
- Staff spoke warmly about the person they supported and told us they felt they had built a good relationship with them. One member of staff said, "A great relationship like family."
- Staff had different skills and interests that supported people in different areas of their life. For example, one member of staff told us the person they supported enjoyed speaking a second language with them. Another member of staff told us the person they supported liked to go into the city centre with them.

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

- Staff all told us about the ways they supported people to make decisions and choices in their everyday life. One member of staff explained, "I like to get [name] involved. I show him a good selection and he chooses". Another member of staff explained, I give [name] a choice so [they] can make a decision."

Respecting and promoting people's privacy, dignity and independence.

- Staff had a good understanding of the need to respect people's independence and dignity. They were able to provide examples of the ways in which they did this both on a practical level and in being aware of how the person receiving support may be feeling.
- Records written by staff were comprehensive and person centred and included the support the person received in all aspects of their life including socialising, seeing friends and family and leisure activities. They were written in a very respectful manner.

Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery.

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

- One person told us about some of their interests and how they liked to spend their leisure time. Records confirmed that this support was provided by staff.
- Copies of care plans were available in the person's home. They contained sufficient information for staff to understand how to support people safely and well.
- Care records and daily records were reviewed regularly to ensure the person was getting the support they needed. Senior staff often visited people receiving care to ensure they were getting the support they wanted and in line with their care plan.
- It was evident from meeting a person supported by the service that they received individual support based on their need's choices and interests.

Improving care quality in response to complaints or concerns.

- A complaints procedure was in place to investigate any concerns or complaints that were received. No complaints or concerns had been made in the past year.
- The provider was aware of and able to explain how they would investigate any concerns or complaints that arose.

End of life care and support.

- Nobody using the service was currently receiving support with end of life care.
- The provider told us that if anyone they supported needed end of life care they would arrange training for staff and offer this 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;

Service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care. Some regulations may or may not have been met.

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

- We tried to contact the provider to advise of the start date of our inspection on several occasions over a period of five weeks and were unable to make contact on the majority of these occasions. Although the person using the service was always able to contact the provider it is important that regulated services keep CQC up to date with their contact details so that we can carry out our regulatory functions.
- All staff had a good understanding of their role in providing person centred care. It was clear from meeting one of the people supported and reading records that high quality care was provided to people in accordance with not only their needs but also their preferences and choices.
- Staff were clear about their roles and a well-defined management structure was in place. Staff were supported and monitored on a regular basis through formal supervision and informal observations.
- Risks to people were identified though the care planning process and the extensive knowledge of people supported that staff had. Identified risks were assessed and action taken to mitigate them.

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

- Senior staff from the service were in very regular contact with the person supported. The provider was able to explain how they gained the views and opinions of people though using different communication methods including observing their body language.
- Staff were very positive about the support they received from senior staff. One member of staff commented, "Brilliant, anything I want I can ask." Another described them as a "Good employer."
- The provider was aware of the need to support people in line with their diverse lifestyles and needs. Staff had received training in equality and diversity and the provider was able to give us examples of how this was implemented in practice.

Continuous learning and improving care; and working in partnership with others.

- Senior staff attended local network groups and registered managers meeting to help them remain up to date with changes to legislation and good practice guidance.
- Records and discussions with staff showed that they worked well with other professionals, including health professionals to benefit the people they supported.
- Systems were in place for checking on the quality of the service provided and implementing any improvements identified. Records of visits to people by senior staff were very brief. We discussed with the provider the benefits of maintaining a more comprehensive record.

