

Services for Independent Living

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Inspection report

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Ratings

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

Summary of findings

Overall summary

This inspection took place on 1 December 2015 and was announced.

Services for Independent Living provides services that enable people to live independent lives in their own homes within their own community. They are registered to support people with learning difficulties, physical impairments, mental health issues including dementia and older people. At the time of our inspection they were providing care and support for 31 people.

At the last inspection on 13 August 2014, we asked the provider to take action to make improvements to their staffing levels. The provider sent an action plan which was received 1 October 2014. At this inspection we could see the provider had made improvements.

At this inspection there was a registered manager in post who was present throughout this inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People were protected from harm and abuse because they were supported by staff who knew how to recognise and respond to abuse. Staff did not start work until required checks had been made to make sure they were suitable to support people in their own homes. Additional checks and risk assessments were completed when necessary.

People were encouraged to maintain their independence and staff supported this. Staff provided care which was kind, compassionate and respectful. People's privacy and dignity was promoted by staff. Staff had developed good relationships with the people they supported. People were encouraged to make their own choices and decisions and felt listened to and respected.

Staff felt supported by the management team and received regular one-on-one support sessions. Staff received induction and comprehensive training in order for them to perform their role well. The provider had a staff recognition scheme in place to recognise and reward best practice.

People felt in control of their care and support. They were encouraged to make decisions and choices which were respected and supported by staff. People knew how to make a complaint if they needed to. The provider completed regular quality checks to ensure that good standards of care were maintained. People's feedback was sought on a regular basis and any areas or improvements identified were acted upon.

People were aware of who the management team were and felt they were approachable and listened to them. The provider undertook regular quality checks to identify changes and drive improvements.

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

People were kept safe by staff who recognised signs of potential abuse and who knew what action to take to protect them.

People were supported by staff to take risks. The provider made sure that staff were recruited in a way that offered protection to people who used the service.

Is the service effective?

Good ●

The service was effective

People were supported by staff who understood their needs.

Staff were trained and supported by the management team.

People were encouraged to make decisions about their care and were supported to keep contact with healthcare professionals to keep them well.

Is the service caring?

Good ●

The service was caring

People were supported with kindness, compassion and respect.

People and their relatives were consulted about their assessments and involved in developing their care plans.

People's privacy, dignity and choices were respected by the staff.

Is the service responsive?

Good ●

The service was responsive

Staff knew how to put their learning into practice in order to support people and were responsive to their changing needs.

People knew how to make their views known and felt that they were listened to by the staff and provider. Action was taken to resolve people's complaints and to improve the service.

Is the service well-led?

Good ●

The service was well-led

The management team promoted an open culture amongst staff and made information available to them should they need to raise a concern. The management team regularly encouraged feedback from people who received support. People thought that their views on how the service was run were valued.

Services for Independent Living

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 1 December 2015 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be in.

The inspection team consisted of one inspector and an expert-by-experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service.

As part of our planning for the inspection we asked the local authority and Healthwatch to share any information they had about the care provided by Services for Independent Living. Before the inspection we reviewed the information we held about the service and the provider. This included statutory notification's received from the provider about deaths, accidents and safeguarding alerts. A notification is information about important events which the provider is required to send us by law.

We spoke with five people who used the service, eight relatives, the registered manager, chief executive and five staff members.

We reviewed three care and support plans, three staff members' recruitment and training records, incident/accident and safeguarding records and details of quality monitoring checks.

Is the service safe?

Our findings

At the last inspection we asked the provider to take action to make improvements to their staffing levels. Following the last inspection the provider sent us an action plan. At this inspection we could see the provider had followed their action plan and made improvements to their staffing levels. People we spoke with were happy with the continuity of staff.

All the people we spoke with told us they felt safe with the care provided. One person said, "I feel completely safe but I am not wrapped up in cotton wool, I can still do what I want". A relative told us, "My relative is absolutely safe with the staff that support them, I have confidence in all of them". Staff we spoke with had a clear understanding about abuse, what to look for and how to report it. One staff member told us, "If ever I had a concern I would ensure the person was safe, raise it immediately with my line manager and document everything". Staff told us they had attended training and knew how to recognise signs of abuse and who to report it to. Staff were clear about their responsibilities and appropriate policies and procedures relating to safeguarding and risk were assessable to advise and guide them. We saw the registered manager had made referrals where necessary and had followed through actions to ensure people were kept safe.

Risks to people's safety and wellbeing had been assessed and were monitored regularly. One relative told us how their relative was discouraged from making certain potentially harmful decisions by staff. Staff told us that people were encouraged to do as much as they can for themselves even if this involved the person choosing to take reasonable risks. Staff knew the risks associated with people's care and understood how to keep people safe whilst ensuring they were not restricting them. Staff were aware of people's different needs and the level of support and equipment needed to keep them safe. Staff told us they were trained how to use equipment before they were expected to use it.

People were safe because the provider followed safe recruitment practices. We looked at the process for the recruitment of staff. Staff told us they had provided references and checks with the Disclosure and Barring Service (DBS) were completed. We saw records which confirmed appropriate checks were completed on new staff members prior to them starting work to ensure that they were safe to work with people. When necessary the provider followed clear staff disciplinary procedures in order to address any unsafe practice.

People told us they received their care when they needed it. One person said, "Staff haven't missed a visit". Another person told us, "Carers have never missed a visit so if they are ill, they have to phone on-call and they always get somebody in. Independent Living is very good and they have not yet let us down". The registered manager ensured that there were sufficient staff available to meet people's needs. They told us they use a capacity calculator to identify the correct staffing mix however, often the amount of time that they can spend with someone is directed by the funding authority. One person said, "I don't feel rushed and I have plenty of time to do what I want".

We looked at how the provider supported people with their medication. People told us that staff reminded them to take their medicine. One relative said, "My relative takes medication with prompts from staff. When changes were made, [staff] made sure everything was accurate and recorded so [relative] knew what to take

and when". Staff we spoke with told us they had received training to administer medicine. They were aware of how to record when people had taken or refused medicine and what to do if there was an error with medicine. Staff told us the administration records for medicines were checked during spot checks completed by the senior staff. We saw records where the competency of staff was assessed in prompting and recording medication and records of spot checks. The registered manager told us these spot checks were used to identify any errors or training needs and to maintain best practice.

Is the service effective?

Our findings

People told us that they were happy with the care and support they received. They said they were supported by staff who were well trained and supported to meet their needs. One relative said, "The carer knows what they need to do and has had the correct training to help with my [relative's] needs, most definitely". Staff said they completed shadow shifts with more experienced staff members to introduce them to people and become accustomed to the role they undertook. They were assessed by a senior staff member as part of their induction programme to ensure they were competent to work with people. Staff told us they also attended regular training sessions. We saw records of staff training and competency which confirmed this. One person told us, "Prior to the carer starting they came here, we met them, they are great". The registered manager told us the induction period ensured the staff member was comfortable and confident in their role and used to build a rapport with those they will be supporting. Staff told us they received regular training sessions and had the opportunity to suggest training they believed they would benefit from. One staff member told us how they wished to increase their knowledge in a particular area and how the provider supported them in completing this training.

Staff felt well supported by the management team and received regular one-to-one support sessions. They told us they used these sessions to address any difficulties they might be experiencing and to discuss any training needs. Regular staff meetings took place and staff told us they are able to use these meetings to share best practice. One staff member said, "We were made aware of a medication recording error occurring elsewhere during a staff meeting. We talked about how it could happen so we don't replicate the mistake ourselves". We saw records confirming actions identified at these meetings were completed as arranged.

Staff were proactive in seeking assistance when the needs of people changed. One relative said, "They [staff] are excellent at picking up on any small changes and fully understand the medical condition of [relative]. They always act promptly and seek assistance immediately. They keep me fully informed about any changes and I feel so reassured they are involved". Staff we spoke with said they regularly saw the same people and were able to pick up any subtle changes in health and behaviour. We saw records of regular healthcare appointments to ensure people's day to day health care needs were met.

People told us their consent was always sought before any care or support was given. One person said, "They [staff] always ask my permission before doing anything, it helps me feel that I am still in control of my life". Another person told us, "I make decisions and have a say in how things are run". One relative said, "[Relative] is involved in making decisions with regards to their care and treatment. They will choose what they want for lunch, where they want to go and what they want to do for their day's activities".

Staff were proactive in seeking assistance when people's needs changed. Staff told us that as they consistently saw the same person they were able to notice changes in health including any weight loss or gain. One staff member said, "We regularly monitor weights as these are a good indicator of health. Any changes significant and we seek medical advice". We saw records of regular health care referrals and visits. Specialist advice was obtained when required. For example, people and staff had the support of specialist nurses. One relative said, "Staff are completely on top of any changes in medical condition. They act

immediately and keep me informed of any developments". Staff had appropriate medical support to effectively meet people's needs.

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty were being met. 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. Any such applications must be made to the Court of Protection. The provider had properly trained and prepared their staff in understanding the requirements of the Mental Capacity Act in general. The registered manager told us they were currently assisting someone making significant changes in their life. The registered manager told us the person's capacity to make these specific decisions had been assessed. Although the provider was not implementing the changes they were supporting the person emotionally.

We looked at how people were supported with their eating and drinking. People told us they were supported to eat and drink sufficient amounts to maintain their wellbeing. One person told us about what they liked to cook and eat. They said, "They [staff] talk with me about what to prepare, what is good for you and what is just nice to eat, we then prepare and eat together". One staff member told us, "As you spend the time with someone you know what they have eaten and drunk, but to make sure you talk to the person and check records of previous days just to make sure they had enough". We saw records where staff had responded to a decrease of appetite and sought medical assistance. Staff assisted and encouraged people to take supplements and recorded this appropriately.

Is the service caring?

Our findings

All of the people we spoke with told us how caring the staff were who supported them. One person said, "The support is excellent, staff also have a sense of humour and they feel more like friends". Staff spoke about those they supported with kindness, compassion and warmth. One relative said, "[Relative] is still quite young and very embarrassed about having personal care. We had to pick a worker that was suitable for them and this same staff member comes all of the time. They [staff] are brilliant and it means that I can actually go out and have a break and not worry about [relative]". Staff understood and knew people's needs and life histories they were able to support them in more caring way.

People told us how they felt staff had gone above and beyond what was normally expected. One person told us, "I went swimming with my support worker, I need to build my confidence and they motivate me to keep going. I am so proud of myself". One relative said, "They've been absolutely wonderful bending over backwards to help enable my relative to have a decent life. I really, really appreciate it". As part of a birthday celebration a relative told us how the staff member did extra hours so that a special day could be arranged for the person they supported. A relative said, "If they hadn't come I don't think we would've been able to do it. That meant a lot to us. They cared enough about my relative to help us get there and that's a wonderful thing. They cared so much that we actually got to fulfil [relatives] birthday wishes".

People told us they were fully informed about their care and were involved in the initial plans and in any reviews. One person said, "I always tell [staff member] what I want to do and they always listen and help me as I like". People and their relatives were actively encouraged to express their views about the care delivered and any decisions about their support. One person said, "I am fully involved in the planning of my support. I am making some major changes to my life and they are fully supporting me with this". Another told us, "Staff go through the care plan with me. We have a chat before we do things. They listen to me and we decide things altogether. It depends what the discussion is, they guide me through because I'm not good at making decisions". People felt included in the planning of their care and support.

People were encouraged to make decisions about the care they received and who assisted them. They were involved in the recruitment of staff who supported them. One person said, "You spend a lot of time together and it is essential that you get on". We saw records which detailed changes of staff following discussions with people being supported. We saw recruitment records which involved people in the recruitment decision making process and the development of interview questions. One person said, "I feel involved in the recruitment process as I am the one who they are going to be working with at the end of the day". People we spoke with told us they had the opportunity to attend the staff meetings and were able to take part in any discussions as it involved them and their care. One person said, "They always take on board what I want and how I want it, I am always given choice". Decisions people made were respected and supported by the staff supporting them.

People had information and explanations presented to them in a way they could understand. One person told us, "I have all the information I need sent to me by email along with regular updates and notices". A relative said, "The communication is good between my relative and their carers – there has never been any difficulties. If they don't quite understand them they will always ask them to repeat it, which is good. They

know how to talk with them and understand the difficulties they have to adapt and allow time for them to respond".

People have their dignity and privacy respected by the staff who supported them. One person told us about their gender preference for the staff member. They told us this had been respected from the start of their involvement. Another person said, "They do respect my relative and their dignity at all times and especially when helping them with personal care". A staff member told us, "Even if you are the only ones in the building you make sure you maintain privacy and dignity at all times, it's how you would like to be supported".

Is the service responsive?

Our findings

One person said, "They all listen to what I need, which is what makes everything work so well". Regular reviews of the support plans and formal meetings took place which included people and their families. Care and support plans included a personal history, needs and preferences. People received care which was personalised to their needs and adapted to any changes by having open communication with people who receive support. One person said, "They really took the time to understand me and my illness and how it affects me personally which really helps". The registered manager showed us personalised care and support plans. The views and wishes of people receiving support were captured in these plans. One person said, "The staff ring me to see how things are going with the care package. Overall everything is good, and I would recommend Services for Independent Living to others".

Changes in people's needs were identified and acted on promptly. For example, one staff member told us about when someone became ill they assisted them to make contact with the GP. They ensured the person was able to pass on all relevant information and as a result of advice given the care plans were amended and risk assessments updated. One person told us that they felt very much in control of any changes in their care and support and could discuss their concerns at any time with any staff member. People were involved in regular meetings with the staff team who supported them. One person said, "Our team coordinator comes out every so often and joins us at team meetings. They are regularly available if we need anything and obviously if we have any issues. They can accommodate my needs brilliantly".

People told us that they knew how to raise a concern or make a complaint and were confident they were listened to and responded to appropriately. One person said, "We've had to make a complaint in the past and it was dealt with very well". Another person told us, "I know how to make a complaint if I need to. I would phone them and there's paperwork which tells you how to make a complaint. We can use an email too". The complaints process was clearly documented to guide people and staff. The registered manager showed us their record of compliments, complaints and comments. People were able to share their experiences with the registered manager and felt comfortable to raise any concerns with them. Any issues raised were addressed and the registered manager had effective systems in place to ensure there was an appropriate response.

Is the service well-led?

Our findings

People told us that they knew who the registered manager was and that they had regular contact with them. One person said, "I can pop into the office at any time, I don't need an appointment they are always available to me". Another person told us, "I can contact the registered manager at any point and feel confident that any issue or concern will be resolved quickly and efficiently". People we spoke with told us that they were regularly asked to provide feedback on the support that they received and were confident that their opinions were listened to and acted on. One person said "I receive regular surveys asking for my opinion".

The provider promoted a positive and open culture where people were at the centre of the service that they provided. One person said, "I quite often ring if I want to talk about something". People and their families received regular communication including newsletters. The provider had given people the opportunity to nominate individual staff members and teams for a best performing award at the annual general meeting. One person said, "I nominated my team for the award. It is good to be able to let them know just how much you appreciate them and to feel part of the organisation". The registered manager told us the awards were introduced to recognise staff and the work they do which helped motivate but also gave a well-deserved thank you. One staff member said, "You don't come to work expecting an award but it is so nice when someone just says thank you, you feel valued". People we spoke with told us they had the opportunity to attend the annual general meeting where they received updates on the service, the challenges for the future and planned developments.

Staff said they were well supported in their jobs by the management team and they received regular one-on-one support sessions. Regular training was provided to enable staff to develop their skills in providing care. One staff member said, "I can request and access training not only directly relevant to my role but also in areas I have a general interest". Staff felt they received a comprehensive induction to their role which equipped them with the skills and confidence necessary. We saw a record of a staff meeting which provided a forum for staff to openly discuss their practice, share information and ideas about the development of the service. Staff knew what was expected of them and they were happy in their work. Staff members had a clear understanding of the provider's whistleblowing procedures and felt able to raise concerns of bad practice should they need to. Staff said they believed they would be supported by the management team if they had to raise a concern. There was provision in place for staff to seek advice and support outside of office hours ensuring staff had access to information and guidance at all times.

Incidents and accidents were appropriately reported. The registered manager reviewed any incidents to ensure proper action had been taken. They told us how action was taken to minimise the risk of similar incidents happening again. We saw records confirming actions had been taken to reduce the risk to people. The provider had a registered manager in place. The registered manager had a clear understanding of their role, responsibilities and organisation values. The registered manager had appropriately submitted notifications to us.

There were established systems to assess the quality of the service provided. These included a programme

of quality checks undertaken to assess compliance with internal standards. We saw actions had been completed where needed in order to drive improvements in the quality of support. We saw regular quality checks had been undertaken on care plans and medication records and actions taken when improvements or changes were identified.