

Innovative Support Ltd

INNOVATIVE SUPPORT LTD

Inspection report

Rourke House
Watermans Business Park, The Causway
Staines-upon-thames
TW18 3BA

Tel: 07460842945

Date of inspection visit:
17 April 2023

Date of publication:
03 May 2023

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

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

At the time of the inspection, the location did not provide care or support to anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

About the service

INNOVATIVE SUPPORT LTD is a domiciliary care agency providing personal care to younger adults who may have a learning disability or autistic spectrum disorder or who need support with their mental health issues. At the time of our inspection 1 person was using the service.

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

Right Support:

People were supported to have 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. People were supported to access their local community to feel included within society and to participate in activities they enjoyed. Staff were supported with appropriate training to provide them with the skills and knowledge to provide good care to people. Consent to care was requested from people and staff engaged with them to enable them to make informed decisions.

Right Care:

People were kept safe while using the service and managers ensured staff were present at all times. Staff understood their safeguarding responsibilities and people received care from staff who had been recruited in line with the providers policy. People received care from a staff team who were kind and patient and truly wanted to help people have a better life. Staff were respectful of people's individual needs and how to support them in a way that respected their privacy and dignity. Staff did not discriminate against people who used the service, and all were welcome to use the service at INNOVATIVE SUPPORT LTD. People's care plans were personalised, and the management team told us they worked with people and their professional network to find the best way to support people.

Right Culture:

The registered manager and nominated individual were focused on providing a quality service for people to ensure they were not excluded from society and could live their lives in the best way possible. Managers at the service were available and encouraging to their staff team. They provided plenty of opportunities for

staff to discuss any concerns they may have and to talk about what was working well with people's care and how to improve it. Feedback from staff and people was important to the service to help them develop the care provision for people and to support staff where needed. Quality systems were in place to monitor the quality of the service.

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

Rating at last inspection

This service was registered with us on 16 April 2020 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was 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?

Good ●

The service was well-led.

Details are in our well-led findings below.

INNOVATIVE SUPPORT LTD

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in a number of 'supported living' settings, 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.

Registered Manager

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

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well

and improvements they plan to make.

We reviewed information we had received about the service since it was registered in April 2022. We used all this information to plan our inspection.

During the inspection

We spoke with 1 person who used the service to obtain their views on the care they received. We spoke with 4 staff, including the registered manager, care staff and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of documents. This included the care plan for 1 person, 4 staff files in relation to their recruitment and various other documentation relating to the running of the service, such as training and supervision records and audits.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- There were enough staff to provide safe care and support to meet people's needs. People using the service required 24-hour care and support. This meant a member of staff was always present to ensure people were safe at all times.
- One person told us, "I am sure there are enough staff, they are around during the day and night. Someone always comes if I need them during the night, but I don't often need to call them at night."
- Staff said they had enough time to spend with people. They told us, "There are definitely enough staff. Whenever we think we might need more, [registered manager] is very good and will make sure this is addressed," and "I don't think there are any staff issues, in fact I am sure we don't."
- Staff were recruited safely to the service and in line with the provider's recruitment policy and procedure. Records were maintained to show that checks had been made on employment history, references and the Disclosure and Barring Service (DBS). The DBS helps employers make safe recruitment decisions and helps prevent unsuitable people working with people who use care and support services.

Systems and processes to safeguard people from the risk of abuse

- There were systems in place to safeguard people using the service from the risk of abuse. People told us they felt safe with staff and how they supported them. One person told us, "I feel very safe here." They also told us they would summon staff for help by ringing their mobile phone.
- We discussed this with the registered manager as to whether in the event of a significant emergency, the person would be able to operate their phone quickly enough. Following the inspection, the registered manager confirmed that they sourced a simple battery operated call bell which would sound in the communal areas to alert staff. This will be discussed with the person, who will make the final decision as to whether they wish to adapt this additional safety measure.
- Staff received training on safeguarding adults and were clear about their responsibility to report any concerns, and how to escalate concerns as necessary. Those staff we spoke with told us they would report any suspicions of abuse to the registered manager or nominated individual who would then make a referral to the local authority safeguarding team.
- One staff member told us, "People need to be protected from harm, for example emotional or physical harm. It is most important that we are now also aware of cybercrime and internet activities." Another said, "If the person's general behaviour changed, for example if they looked scared, this would concern me and alert me to possible abuse."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people were identified and clear guidance was in place for staff to help reduce these risks. One person told us, "Staff make sure they manage my care, it's all in my risk assessment and I would have

problems if they didn't follow it."

- Staff were able to tell us about people's individual risks and described how they would help mitigate these. For example, a member of staff told us about the importance of repositioning a person properly as well as supporting them with their skin care.
- Whilst there were no recorded accidents, there were systems in place to ensure any accidents would be recorded and reviewed to identify any learning and actions which could be taken to prevent a similar event happening again.
- The service had a business contingency plan to ensure people care would continue to be delivered in the event of staff shortages and emergencies such as an infectious disease outbreak or adverse weather conditions.

Using medicines safely; Preventing and controlling infection

- There was a medicines policy and procedure in place and staff received medicines training to ensure they had the skills and understanding to administer people's medicines safely. We saw that people's medicines were regularly reviewed by the GP, and where relevant, a medical specialist.
- Staff told us they took responsibility for different aspects of medicines management. This included reviewing stock and ensuring repeat prescriptions were in place. The provider completed a monthly audit of medicines administration records and a weekly count of loose medicines.
- The provider's COVID-19 protocol was reflective of current government guidelines.
- Staff confirmed they had access to sufficient stock of personal protective equipment (PPE) to help keep them and the people they supported safe. Relatives confirmed staff used their PPE appropriately when supporting people.
- Staff had completed training in infection, prevention and control. Their competencies were regularly assessed to ensure practices remained in line with current guidance.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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

- People's needs were assessed by the provider before their care began. The registered manager met with people and professionals involved in their care and reviewed professional reports to draw up a care plan based on their needs and preferences.
- The provider continued to assess whether people's care met their needs through regularly reviewing their care plans and consulting with people and their professional network.
- The registered manager kept up to date with developments in legislation to ensure care was provided in line with relevant current national guidance and best practice. Any changes that affected the way in which care was provided were shared with staff at team meetings.

Staff support: induction, training, skills and experience

- People told us they believed staff were competent and well trained. One person said, "I feel really safe with how staff hoist me so well."
- New members of staff spent time shadowing experienced staff members prior to being signed off as competent to work on their own. A person told us, "If there is a new staff, they will work alongside an experience staff before they support me."
- Staff completed the Care Certificate induction programme. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. Staff told us they also completed other training, "We are supported to enhance our skills. This has positive benefits for the people we support because it means we give them a better service."
- Senior managers understood the importance of regular supervision to provide opportunities for staff to discuss their role and their training and development needs. Staff had the opportunity meet with their line manager regularly. This gave them the chance to discuss their role, as well as concerns or training requirements. One staff member told us, "We discuss my development needs, as well as my day to day work."

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

- The registered manager understood the importance of assessing people's needs in relation to nutrition and hydration and told us they would make referrals to healthcare professionals such as speech and language therapists if people were at risk when eating or drinking.
- One person told us how they were supported to source their food preferences. They said, "I have told staff about the spices and vegetables I would like to shop for and they make sure we go to shops which have these."

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

- Staff worked closely with other health and social care professionals to achieve good outcomes for people. These included GP's, dentist, specialist medical staff, physiotherapists, occupational therapists and social workers.
- One person told us, "If I have any problems or pain, I only have to tell the staff about this and they will contact my specialist. I am also going to the dentist soon."
- People's care notes and health management plans evidenced that staff followed advice from other professionals and implemented their recommendations.

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 MCA 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA , whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Consent to care and treatment was requested before care was delivered to people. People told us that their consent was sought by the care workers before they were supported in any way. One person told us, "Staff ask me first for my permission as that is what I want them to do."
- All staff attended training in the MCA and understood how its principles applied in their work. Staff told us how they encouraged and supported people to make their own decisions. One told us, "It is all about the person and following their wishes. I support people to make choices in every aspect of support and care." Another said, "I can make suggestions but I always ensure that the person knows they are in control."
- The registered manager understood the need to assess mental capacity if there was a possibility a person lacked the capacity to make informed decisions. Where an assessment determined a person lacked the capacity to consent, the registered manager told us they would engage with relevant professionals to ensure decisions were made in the person's best interests.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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; Supporting people to express their views and be involved in making decisions about their care

- People were asked in their initial assessments whether they had preferences regarding the gender of their allocated care workers. Assessments also recorded any needs people had in relation to their religion, culture and sexuality.
- People told us staff treated them with respect. A person said staff showed kindness towards them, "Staff talk nicely to me and I like them all. I can always tell them if I am unhappy about something and they really listen to me."
- Staff told us they enjoyed their work with INNOVATIVE SUPPORT LTD. They spoke fondly of those they supported and they told us how they had got to know them as an individual, their likes and dislikes. A staff member said, "It is all about respect and making the effort to find out as much as possible about those we support."

Respecting and promoting people's privacy, dignity and independence

- People's care plans detailed their goals and aspirations and how staff should support them to maintain their independence. For example, supporting them to use public transport wherever possible. One person said, "I love travelling by bus. Staff help me with this even though it can take longer."
- Staff understood the importance of promoting people's independence and supporting them to maintain their skills and abilities. People's assessments recorded what they could do independently, as well as the areas in which they needed support. A member of staff told us, "We are always trying our best to give [person] all the independence they need. I truly believe they are developing new skills all the time."
- People told us how staff respected their privacy and dignity and said, "Staff always knock before coming into my room. I would be really embarrassed if they didn't do this." A member of staff told us, "It is so important to respect [person's] privacy, not just with their personal care, but also make sure we are not overheard if there is something confidential to discuss."

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

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

- People's care plans were developed from their initial assessment by the registered manager and in full consultation with the person and their professional network. Care plans were person centred and contained details for staff about how people preferred their care to be provided, as well as people's individual routines and preferences.
- One person told us they were involved in reviewing and developing their care plan to ensure that care was delivered according to their preferences. They said, "I was asked about my needs and what I wanted. I was able to give my views on how I can be best supported with my care needs. It's good to be asked."
- The registered manager reviewed people's care plans periodically to take account of any changed needs and to ensure it was accurate and reflected the person's individual needs. Staff told us they also alerted the registered manager to any changed needs.
- Staff told us they understood people's needs, "[Person's] needs are clearly set out in the [care] plan for us to follow and I read it regularly. Any changes are notified to us and we can also let [registered manager] know if something is not working anymore."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication and sensory needs were recorded during their initial assessments and any needs identified were documented in their care plans. Each person had an Accessible Information Standard statement which outlined their communication preferences. For example, whether they preferred verbal or written communication; if this should be in an Easy Read format and how they liked to be contacted, either face to face or by telephone.
- The registered manager told us how information related to the agency would be provided in alternative formats to ensure people were able to understand it. For example, the complaints policy and contract for care were available on request in easy-read format.

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

- People had access to meaningful activities and were supported to develop their daily schedule in

accordance with their preferences. One person told us how as a result of this, they had recently become proficient at independently managing their own money.

- People had monthly one to one meetings with their keyworker during which they were encouraged to share their views on all aspects of their care and support. They could also raise any concerns or complaints and plan for additional activities or holiday. One person told us, "My keyworker is [carer] and if I have any problems or new ideas I will discuss those with [carer]."

Improving care quality in response to complaints or concerns

- The service had a complaints procedure which set out how any complaints received would be managed. This was given to people when they began to use the service. The agency had received no complaints since its registration.

End of life care and support

- People had end of life care plans in place. However, at the time of the inspection no one using the service needed end of life care and support. The registered manager knew where to seek guidance and support should anyone using their service require this type of 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- There was a framework of governance underpinning the service to check people received a good standard of care. The management team consisted of a registered manager and nominated individual who worked together well and had a clear division of roles and responsibilities.
- Systems were in place to monitor the quality and safety of the service. These included audits and reviews of people's care plans and files, reviewing daily care notes, checking care workers' infection control practices and their use of PPE. The registered manager also kept a tracker of incidents; complaints; safeguarding and field observations.
- The registered manager and nominated individual carried out field observations to observe the quality and safety of the care staff provided. These were often unannounced to the members of staff and at varying times of the day and night.
- Staff understood their roles and responsibilities. The provider communicated these via handovers, supervisions, observations, and appraisals. Staff spoke positively about how the registered manager effectively communicated with them to keep them informed about people's needs, changing conditions and needs of the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Regular quality checks were made with people and it was evident people were happy with the care provided to them. One person told us, "[registered manager] visits me regularly and I am confident to speak with them. I would tell them about something if it was not right."
- Staff told us they felt management listened to suggestions and involved them in identifying improvements to people's care. They said their suggestions and ideas for improvement were welcomed. One told us, "I feel that my contributions are respected. It is a very good and safe environment to learn and develop in."
- People and staff also had opportunities to give anonymous feedback online each month about their care and told us they were confident their views would be listened to and acted upon.
- The provider worked in partnership with health and social care professionals to achieve good outcomes for people. These included the local authority, GP's, and specialist health professionals. A healthcare professional commented on the stability of one person's medical condition which they attributed to the level of care provided to the person.
- The provider told us they engaged with other providers in order to share ideas and good practice. They

also told us they reviewed information on social media for ideas about activities and alternative means of social engagement for people.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The registered manager and nominated individual understood their responsibilities under the duty of candour and the requirement to act in an open and transparent way when concerns were raised. They understood that notifications of significant events must be submitted to CQC and the local authority. At the time of the inspection, there were no incidents which met the duty of candour threshold. People and staff told us the registered manager was open and transparent.
- Staff knew how to whistle-blow and told us they would raise concerns with the local authority and CQC if they felt they were not being listened to or their concerns were not acted upon.
- We were told that learning from incidents was discussed in staff meetings. The registered manager told us they called an extraordinary meeting following incidents, after which they sent an email to all staff to reiterate the learning and agreed actions.
- Staff told us they were actively encouraged to acknowledge any errors made. One told us, "I have no fear about speaking out if I made a mistake; we are encouraged to do so." Another said, "There is no problem about raising concerns or if I have made a mistake. We use team meetings for us all to learn from any incidents."