

Supported Independence Limited

Kelly House

Inspection report

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Ratings

Overall rating for this service

Outstanding 

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?

Outstanding 

Summary of findings

Overall summary

About the service:

Kelly House provides support to people with mental health needs and people with learning disabilities. Some people live in a supported living accommodation, others receive support in their own homes in the community as part of an outreach service.

People's experience of using this service:

People received an Outstanding service. Person centred values were embedded in to practice and delivered by a valued and motivated staff team. Staff were supported to develop in their careers and their ideas about the service were listened to.

Strong links had been established with the local community and the manager had ideas to develop this further. These links were of great value to people using the service and were being used to break down some misconceptions held about mental health.

People were included in planning their own goals and supported to achieve them. Care was reviewed regularly to ensure it continued to meet people's needs. People were encouraged to, and had opportunity to give their views and opinions on how they wanted the service to run.

People told us they got on well with staff and felt safe with them. Staff understood and knew people's needs very well.

There were sufficient numbers of staff available to deliver the support people needed. Safe recruitment practices were in place.

People received support as necessary to make and attend health appointments.□

The service was very well led. The manager was passionate and enthusiastic about their role and the service they provided. Staff felt well supported and told us morale was good within the team.

Rating at last inspection: Good. Last report published on 29 July 2016

Why we inspected: This was a planned inspection based on previous rating.

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.

Is the service effective?

Good ●

The service was safe.

Is the service caring?

Good ●

The service was safe.

Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Kelly House

Detailed findings

Background to this 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 one Inspector.

Service and service type:

The service provided support to people with mental health needs and learning disabilities.

Kelly House is the head office for the service. There is supported living accommodation located within the same building and other supported living accommodation situated in the Bristol, South Gloucestershire and BaNES regions. Approximately 130 people in total receive support from the service, although not all of these people receive the regulated activity of personal care. Due to the minimal personal care needs of people using the service at the time of our inspection, we focused on the supported living accommodation at Kelly House and the outreach part of the service, providing care to people in their own homes. We will look in more detail at other aspects of the service at our next inspection, if at that time, there are people receiving the regulated activity of personal care.

The service had a manager registered with the Care Quality Commission. could ensure that there would be a senior member of staff available to 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. The registered manager was not based at the service full time. There was a location manager in charge of the day to day running of the service.

Notice of inspection:

We gave the service 24 hours notice of the inspection site visit so that we support the inspection.

What we did:

Prior to the inspection we reviewed all information available to us, including the PIR (Provider Information Return) and notifications.

During the inspection we spoke with eight people who used the service, both at the supported living accommodation and the outreach service. We attempted to contact more people but weren't able to make contact.

We reviewed care documents for three people. We spoke with three members of staff as well as the manager. We received other documents relating to the running of the home such as training and supervision matrixes and feedback forms completed by people using the service.

Is the service safe?

Our findings

Good: People were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- ☐ Staff received training in safeguarding vulnerable adults from abuse.
- ☐ Staff felt confident about recognising signs of abuse and acting on them.
- ☐ The manager was aware of developments in the field of safeguarding. For example, they told us about 'Cuckooing' which they felt people they supported were particularly vulnerable to. This is where by people are taken advantage of financially by people pretending to be a friend. The manager told us this would be a theme at the next service users festival so that they could raise awareness of it.

Assessing risk, safety monitoring and management

- ☐ Any risks associated with people's care were outlined in their support plans. The measures in place to manage those risks were outlined.
- ☐ Staff told us that when they had experienced concerns supporting people in the community, they had been able to contact someone to discuss these and action was taken to address it. For example, one member of staff told us about an incident when they had been concerned about the behaviours presented by a service user and the risks they presented. The member of staff told us these concerns were acted on.

Staffing and recruitment

- ☐ There were sufficient numbers of staff available to meet people's needs and keep them safe.
- ☐ The manager told us that offering flexible shifts to accommodate staff's work and home life balance, helped them recruit and retain staff. One member of staff told us how they had been able to adapt their work hours to accommodate their studies.
- ☐ When new staff were recruited, suitable checks were undertaken. This included Disclosure and Barring Service (DBS) checks and references from previous employers.

Using medicines safely

- ☐ People received safe support with their medicines.
- ☐ The manager told us they had a good working relationship with the pharmacy they used.
- ☐ People's medicines were prepared by the pharmacy in to dosette boxes. Checks were undertaken of PRN (as required) medicines to help identify any errors that had occurred.
- ☐ Medicine administration was recorded on Medicine Administration Record charts.

Preventing and controlling infection

- ☐ Staff recognised that people had the right to live in their own flats as they chose, however they did offer support with keeping their home clean and tidy as required.
- ☐ Communal areas of the supported living accommodation were clean and fresh.

Learning lessons when things go wrong

- The manager told us they had, in the past been the subject of a safeguarding complaint. They told us this had been quite a difficult time for everyone. Although there was much in the complaint that they felt was inaccurate, they told us they had treated the incident as a learning experience and looked at what they needed to take from it to learn lessons and improve.
- An aspect of the complaint was around the cleanliness and hygiene of people's individual flats. The manager told us they used this as an opportunity to reflect on tenancy agreements and expectations around cleanliness of the accommodation.

Is the service effective?

Our findings

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

- ☐ People received varying levels of support and for a variety of reasons. Support was delivered in line with these identified needs.
- ☐ Support was reviewed to ensure it continued to be effective and meet people's needs.

Staff support: induction, training, skills and experience

- ☐ Staff were positive about the training and support they received.
- ☐ Training provided for staff included safeguarding, Mental Capacity Act (MCA), person centred support and infection control.
- ☐ New staff undertook the Care Certificate. This is a qualification that provides the minimum skills and knowledge required for working in the care sector.
- ☐ Staff received an annual appraisal and regular supervision to monitor their performance and development needs.

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

- ☐ People received nutritional support in line with their needs. One person told us they liked to be independent in organising and making their own meals. Other people required staff support with food preparation.
- ☐ People in the supported living accommodation had the opportunity on occasion, to contribute a small amount of money towards a meal cooked by staff. Anyone who wished to could help with the meal preparation.
- ☐ Some people had health conditions which required a particular kind of diet, such as diabetes. Staff supported people to maintain their diet in accordance with recommendations.

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

- ☐ People told us staff helped them with any appointments they had with health professionals.
- ☐ Staff were able to accompany people to appointments if they needed support.

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

- ☐ People lived in their own homes with their own tenancies. At the supported living accommodation, thought had been given to ensuring the accommodation met people's needs. There was a launderette available as well as a kitchen. There was also a communal lounge available which was a pleasant area for people to socialise in.

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

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

- ☐ The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.
- ☐ Nobody at the supported living accommodation had a deprivation of liberty authorised by the court of protection. People were able to leave and return as they pleased.
- ☐ Staff received training in the mental capacity act and understood the principles of the legislation.

Is the service caring?

Our findings

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

Ensuring people are well treated and supported; equality and diversity

- ☐ People were supported by staff who were kind and caring. Staff treated people with respect.
- ☐ The manager told us how at Christmas they had been given a budget to buy every service user a gift. The service recognised that not everyone had family or friends they could be with at Christmas, so organised Christmas dinner at the supported living accommodation. One person told us how this had "cheered them up".

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

- ☐ People's goals and aspirations were discussed with them and included in their care plans.
- ☐ People were given other opportunities to raise any issues or concerns, such as service user meetings at the supported living accommodation.

Respecting and promoting people's privacy, dignity and independence

- ☐ People were supported to be as independent as possible. The manager told us for people to move on in to independent living, one of the main priorities was ensuring they could manage their own medicines. The manager was working with their local pharmacy to ensure medicines were prepared in the easiest way for people to manage.
- ☐ One person told us their aim was to move on to independent living, but to achieve this they understood they needed to demonstrate they could be responsible for their own medicines.
- ☐ People using the outreach part of the service were supported with tasks that enabled them to remain independent in their own homes. One person, for example told us how staff helped them deal with correspondence.

Is the service responsive?

Our findings

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

- □ The manager and staff were committed to establishing the service as part of the community and in doing so were challenging some of the misconceptions around mental health. This was an outstanding aspect of the service. Events were held at various times during the year where the local community were involved.
- □ At Christmas time, the service linked with the local Salvation Army to provide a carol concert at the service. The service invited members of the community to attend so they could meet people at the service. This event had been a great success; one person laughed as they told us about how they sung along enthusiastically to the carols! Staff went outside on the street with mince pies to encourage people in the community to come in.
- □ The manager wanted to extend the community links further by putting on events to include local shops and businesses.
- □ The manager told us how once a year they would organise a service user festival. The last one, had again included input from the Salvation Army who came along to carry out basic health checks for people. The festival was used as an opportunity to engage people using the service and give them opportunity to provide feedback and ideas about how they wanted the service to run.
- □ One person became distressed when talking to us, recalling that due to circumstances beyond their control, they hadn't been able to attend a loved one's funeral. We spoke with the manager about this who told us they had recognised the distress this had caused the person and wanted to help them process their emotions around this. A memorial service was organised by the service and family were invited to attend. This was an example of staff having in depth knowledge of a person's needs and providing the support necessary to address it.
- □ People's care was commissioned for a set number of hours per week. How these hours were used was flexible according to people's needs.
- □ One person commented the support they got was "brilliant" and "I wouldn't be here if it wasn't for them".
- □ The supported living accommodation included one bed which was used for respite. In particular the manager told us it was used for people needing support after leaving prison. We saw that a professional had commented about this aspect of the service 'They provided outstanding supporting to a newly released lifer I supervised'.

Improving care quality in response to complaints or concerns

- □ There had been no formal complaints in the last 12 months. However there was a process in place to manage complaints should they arise.
- □ People told us they could speak with staff if they had any concerns.
- □ People using the outreach service told us they were able to contact the office if they had any issues or concerns.

End of life care and support

- The service had experienced people they supported reaching the end of their lives and provided support at this time. For one person being supported in the community, staff attended hospital with them when they were poorly. The person had no family, and so after they died, staff organised their funeral and wake. Staff also cleared the person's flat and dealt with all their belongings. This demonstrated true person centred values within the organisation and was an example of the service going above and beyond the expectations of their role.

Is the service well-led?

Our findings

Outstanding: □ Service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- □ The manager was clearly enthusiastic and passionate about their role and this reflected in the comments of staff. The manager was described as 'amazing' and "I couldn't have asked for a better mentor".
- □ The service was actively looking to challenge some of the misconceptions and prejudices around mental health by looking to establish themselves firmly as part of the local community.
- □ Person centred values were embedded in to the service. It was clear from speaking with the manager and staff that the needs of people being supported were at the centre of how the service was run. This was evident in various way, for example how staff had met the emotional needs of a person who had experienced bereavement. And how the provider had gone to great lengths to ensure people were cared for at Christmas.
- □ The ideas and views of staff were valued and support was given to bring these ideas to fruition. We heard about several ideas that staff were being supported to develop that would enhance the wellbeing of people using the service.
- □ Senior staff managed a team of support workers who were motivated and valued. This had clear benefits for people using the service because staff wanted to do well and progress in their careers. The manager told us about one member of staff who had wanted to progress in their career and they had been immediately given tasks to carry out that would help them in reaching their goal and gain managerial experience.

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

- □ The registered manager visited the service regularly.
- □ Day to day management was undertaken by a manager and two senior staff.
- □ Staff spoke positively about the support they received and told us there was always support available when they needed it when they were out supporting people.

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

- □ As well as service user meetings, people were asked to fill out feedback forms at the end of their service user reviews. These were collated and any themes identified on a six monthly basis.
- □ The manager told us they wanted to improve this form further to make it more user friendly.

Continuous learning and improving care

- □ The manager and staff were actively looking at ways to improve the service further and provide more opportunities for people.
- □ One member of staff for example, told us they were hoping to start a football team for people using the

service.

- The manager also told us that a member of staff had approached them with the idea of supporting dating amongst people using the service. This was because people often expressed the desire to form relationships but there were limited social opportunities to do so. This idea was at an early stage but reflected how staff were motivated and encouraged to continually improve the service and people's experiences.
- This suggestion also reflected the sense of positive risk taking within the service. The manager recognised there were risks associated with the idea of dating amongst service users but felt they could be managed and had encouraged the member of staff to proceed with the idea.

Working in partnership with others

- The manager had built links with various other services and organisations in the community.
- The manager worked with the probation service to provide respite accommodation for people newly released from prison.
- The manager had built positive relationship with the local church and Salvation Army. The manager allowed these services to use their car park at weekends, and out of this a positive relationship had grown which had clear benefits for people using the service. The pastor of the church provided spiritual support for example, when staff and people using the service experienced bereavement.