

Channel Homes (UK) Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Channel Homes (UK) Limited is a supported living service in a cluster arrangement that supports up to 18 people with learning disabilities some of whom also have other needs. People have the tenancy of their own flat.

At inspection the registered manager confirmed that of the 18 people in receipt of the service there was only one person in receipt of minimal 'personal care' support; our inspection therefore was only able to reflect the service this person received and how their needs were being met.

Rating at last inspection

At the last inspection, the service was rated Good overall with a Requires Improvement in the 'Well Led' domain'.

Why we inspected

We carried out an announced comprehensive inspection of this service on 13 & 14 April 2016; this was to ensure that someone in authority would be present in the office to provide us with access to important documentation. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of Regulation 17 of the Health and Social Care Act Regulated Activities Regulations 2014, Good Governance. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Channel Homes (UK) Limited on our website at www.cqc.org.uk

At this inspection we found the service remained Good overall and is now rated Good in the Well Led domain.

Why the service is rated Good

People told us they were very happy with their support and that the registered manager and staff involved them in discussions about their support needs. They appreciated the flexibility of the support and how they could change how and when their support hours were sometimes delivered.

The service had improved since the last inspection. Audits to check on a range of areas regarding the person's support had been implemented; this provided assurance to the registered manager and the provider that the person was being supported appropriately. The registered manager continued to take responsibility for updating care and risk information to reflect any changes in people's level of independence or needs. This was always discussed with the person. The registered manager undertook unannounced 'pop ins' to see people as part of the checks she made, and by covering some shifts was

available to people in a less formal capacity if they wanted to talk about the service or raise concerns.

Staff said there was a very good sense of team and staff were supportive of each other. The provider and registered manager were a visible presence and staff said they found them approachable and easy to talk with. Staff said communication was good and they felt listened to and empowered to make suggestions and ideas to improve the service.

Staff were given opportunities to meet together and discuss issues that arose. They were confident in dealing with incidents and or accidents and knew how to keep people safe from harm. Staff knew their responsibilities to record and report incidents, accidents or issues that arose to the registered manager.

Staff were provided with a range of policies and procedures relevant to inform their work and the provider and registered manager updated these as changes in best practice or legislation occurred, and updated information was relayed to staff who were asked to read amended or updated policy or guidance and sign when they had. For example, the registered manager and staff understood the principles of the Mental Capacity Act 2005 and how this applied to people living in supported living services.

The provider and registered manager had good links with supported living networks and care professionals in the local area; they participated in conferences and workshops driving improvement in the delivery and expansion of supported living.

People told us that they were asked to comment about the service they received through regular checks made with them by the registered manager who also asked the person to complete a survey from time to time. Their feedback was analysed and any identified issues were addressed to the person's satisfaction.

The registered manager understood their responsibilities to inform the Care Quality Commission of significant events where required.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

We found that action had been taken to improve quality monitoring in the service. The service remains Good.

The service was well led

Systems for monitoring and assessing service quality had been developed. The registered manager also undertook unannounced visits to ensure standards were being maintained. People were asked for their views about the service.

There was good staff morale and team work. Staff said communication was good; they felt their views and input was valued and they could influence change. People were given information in an accessible format and staff also relayed this verbally if needed so people understood.

The provider and registered manager ensured policies and procedures were kept updated and had formed good working relationships with local health and social care professionals.

Good ●

Channel Homes (UK) Ltd

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.

We undertook an announced focused inspection of Channel Homes (UK) Limited on 24 January 2017. As people and staff were usually out during the day we gave the provider short notice of our inspection to ensure that someone would be available to meet with us. The inspection team consisted of one inspector.

This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our 13 & 14 April 2016 inspection had been made. We inspected the service against one of the five questions we ask about services: is the service Well Led? This is because the service was previously not meeting a legal requirement to assess and monitor service quality. This inspection was carried out by one inspector.

The provider had not completed a new Provider Information Return (PIR), because we carried out this inspection before the required return date, therefore the registered manager had not yet been requested to complete a new form. The PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

Before the inspection we reviewed all the information we held about the service, we looked at previous inspection reports and any notifications received by the Care Quality Commission. A notification is information about important events, which the provider is required to tell us about by law.

We spent time speaking with the one person in receipt of the regulated activity, personal care. We also spoke with registered manager and the managing director of the organisation and three support staff.

We looked at assessment and monitoring information, operational documentation such as policies and procedures, staff meeting minutes, and processes for managing complaints, accidents/incidents and notifications. We checked the person's care plan, associated risk assessments, and records of medicine

administration and guidance to ensure these were being kept updated.

Is the service well-led?

Our findings

People told us that they were happy with the support they received they commented. "I love living here, like everyone who supports me; I can speak to staff about anything". About the registered manager they said that she was approachable and always available and that "she pops in and checks things."

At the previous inspection in April 2016 we had identified that the provider and registered manager had not adequately developed a system to assess and monitor the quality of service delivered to ensure this met the requirements of legislation. Since then an audit checklist had been implemented for completion by staff which was then checked by the registered manager. This ensured that staff were completing the important documentation relating to people's support for example their daily diary, any health or other appointments and that communication and night books informed other staff of any important information or happenings.. Environmental health and safety checks were conducted each week to ensure people were living in a safe environment and staff providing support were not placed at risk.

In addition, the registered manager continued to undertake unannounced 'pop ins' to people receiving support and others to check aspects of the delivery of support and ensure this was being maintained. The manager kept a record of these visits and any issues highlighted were added to areas for discussion at handover time with staff or placed in the communication book as a reminder to everyone. The registered manager also met with people on a regular basis to ask for their views about how their support was delivered and if any changes or improvements were needed. People were also surveyed for their views from time to time and their feedback was analysed for any themes or issues where improvement may be needed either to their living environment or support.

At this inspection improvements had been made and the service was compliant with the regulation.

The service had a long established registered manager who understood all aspects of the service; she was a director of the company and committed to providing people with a high quality service. She was a visible presence to staff and people being supported and was on site every weekday and sometimes worked on shift on a sleepover or on weekend cover.

The provider and registered manager fostered a positive empowering culture for staff that had led to a strong sense of team identity and support, staff were proud of the service they offered and they felt valued for their contribution; this aided the continuity of staffing which was a testament to how committed staff were to the service and how much they enjoyed their work. Staff understood their own roles and responsibilities and the lines of accountability for reporting issues. Staff felt listened to and able to influence how the service developed for example, staff reported that some people were less able to use baths and they would benefit from showers in their flats, the provider and registered manager had listened to this and a programme of replacement was underway for those affected.

Staff said they thought communication was good and they always felt well informed about happenings in the service. They had opportunities to meet as a full staff team several times each year but daily handovers

enabled discussion to take place in regard to the support offered to individual people and any wider issues. The registered manager told us that sometimes at handover common themes were discussed that impacted on most people using the supported living service for example; healthy eating, and staff discussed ways of promoting good nutrition for some people whilst respecting people had the right to make unwise or unhealthy choices.

The registered manager also discussed with staff wider issues that impacted on the service for example funding cuts. This was so that staff understood the context in which some changes in service delivery were made. The provider and registered manager met regularly and confirmed that they regularly reviewed the direction of the service and had lively discussions around this and the way that support was or should be delivered. These meetings provided a platform for discussion around operational issues as well as personal development of the registered manager.

The provider and the registered manager were accessible to staff and the people they supported. People knew they could seek the registered manager out at their office during the week and was provided with out of hour's call numbers to access the sleep in staff member at night or out of hours on a Sunday. People were encouraged to talk with their support workers about things that worried them but were also encouraged to come forward and speak with registered manager who was available most weekdays in her office.

People said that they appreciated the flexibility afforded to them in the way they could sometimes make changes to how they used their support hours and when. They said that staff kept them informed and that they felt involved in discussions about how their support was delivered. Staff demonstrated that they were very familiar with people's characters and support needs. Staff supported and responded appropriately using agreed strategies for managing situations that made people anxious.

People's reading levels differed widely although much of the important documentation relevant to their understanding of their rights and responsibilities as tenants and the support they received was in an easy read format. Support workers said they would talk through documentation with people to ensure they understood it.

The provider and registered manager kept themselves updated through attendance at relevant conferences and commissioning groups as to the need and direction of supported living. They subscribed to a company that kept them informed of important regulatory changes for example in employment law, they accessed the internet and relevant sites including the Care Quality Commission website to update their knowledge and understanding of changes in legislation, methodology or best practice guidance. Policies and procedures were amended to reflect changes and staff were asked to read updated documentation to ensure they supported people in accordance with the changes. For example the registered manager and staff were familiar with the principles of the Mental Capacity Act 2005, the right of people to make unwise decisions and also the need for best interest discussions where people lacked capacity in some areas of their daily living. The registered manager monitored that staff had updated themselves and had attended relevant training as and when this became due so they could support people's needs and wishes appropriately and in accordance with current practice or legislation.

The registered manager understood her responsibilities to inform the Care Quality Commission of any incidents or events they were required by law to tell us about, but nothing had occurred that was reportable since the previous inspection. A system was in place for the reporting of accidents and incidents but these were infrequent and none had occurred in relation to the person supported with the regulated activity. The registered manager was aware of possible themes and trends that could occur from increased accident/incident levels and would implement good practice in analysing them should their frequency

increase.

Records viewed were maintained to a good standard. The information they contained was clear, current and the language used displayed a positive and professional attitude towards the people supported.