

Wiltshire Council







Wiltshire Council Adult Placement Service (Bourne Hill office)

Inspection report

Department of community services
Bourne Hill Office
Salisbury
Wiltshire
SP2 2HX
Tel: 01722 438193

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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	

Overall summary

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 and to pilot a new inspection process being introduced by CQC which looks at the overall quality of the service.

Summary of findings

This was an announced inspection which meant the provider knew we would be visiting. This was because we wanted to make sure the registered manager would be available to support our inspection, or someone who could act on their behalf. The previous inspection was conducted in November 2013, we found no concerns at that time.

There was a registered manager in post at Wiltshire Adult Placement Service (The service is currently being renamed Wiltshire Shared lives service). A registered manager is a person who has registered with the Care Quality Commission to manage the service and has the legal responsibility for meeting the requirements of the law; as does the provider.

People using the service were supported by adult placement carers. Wiltshire Adult Placement Service offers long-term support to people who are unable to live independently in their own home but would like to live with other people in a family orientated setting. The service also offers short-term 'respite' placements for people whose family or carers may require a break or as a stepping stone for someone returning to the community after being in hospital. The service provides a small amount of placements to people living semi-independently within the community. This is called family-kinship and offers people an advice and guidance service.

Services provided were for adults who may have a range of needs including people with learning disabilities, people with acquired head injuries, older people and people who use mental health services. At the time of our inspection there were 33 people using the service.

People using the service told us they were supported to live as independently as was possible for them. The adult placement service officers conducted regular review meetings to ensure that people's safety was always a part of an on-going monitoring process.

People using the service told us they felt "good" about using the service and the way it worked for them. People were able to have organised visits before making a choice about whether this was the placement for them.

All of the people we spoke with, both people using the service and adult placement carers said the service was very effective in achieving the outcome of providing a good life to people. People said they thought the service worked hard to match people with the correct placement.

The adult placement service officers and adult placement carers said they felt supported and had received sufficient training and information which supported them to fulfil their roles. Adult placement carers undertook a rigorous induction programme before being approved by an independent panel. Adult placement carers could not have anyone living with them until they had been approved.

Health and social care professionals who worked with the service spoke positively about the service provided. These included social workers and community nurses who supported people accessing the service. They felt it was a person centred service which provided a great deal of support to people using it.

The adult placement service officers and the registered manager monitored the quality of care and support. Officers met with adult placement carers regularly to discuss the placement and what was working well or not. People using the service took part in yearly reviews and were encouraged to feedback on the care and support they received.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe. People told us they felt safe with the people they were living with. They said they could talk to their adult placement carer if they had any concerns or worries.

Adult placement carers we spoke with had a good understanding of the people they were supporting. They told us that if they had any concerns about a person they were supporting or noticed any changes then they would raise this with their adult placement officer. Safeguarding was discussed during their regular meetings with the adult placement officer.

Good



Is the service effective?

The service was effective. Adult placement carers told us the adult placement scheme was very effective in providing a good life to those people using the service.

Adult placement carers received on-going support and training to ensure they had the knowledge and skills to provide effective care to the people they were supporting.

People received appropriate care and treatment because adult placement carers supported them to attend healthcare appointments.

Good



Is the service caring?

The service was caring. People and their representatives were involved in planning their care and support.

Adult placement carers described how they involved people in making decisions about their daily lives. They said that they respected that people might not always make what they considered to be "wise choices" but that this had to be supported and possible consequences to their actions explained.

People using the service were supported to maintain family relationships important to them. Some people were also supported to make contact with family they had previously lost touch with.

Good



Is the service responsive?

The service was responsive. People were aware of and had access to advocacy services when required.

Care plans clearly detailed how people should be supported, describing their personal routines, likes and dislikes. Adult placement carers told us people were being supported in accordance with their plans of care.

People told us they would know who to talk to if they had any worries or concerns. The complaints procedure was written in a format that people using the service would understand.

Good



Is the service well-led?

The service was well-led. People and adult placement carers said they thought the service worked well and had no reason to complain. One person thought the officers supporting the scheme did a "good job".

Good



Summary of findings

The service was supported by an approachable team of officers who made sure people received services that were person centred and promoted their independence.

The quality of the service was regularly reviewed. Staff were clear about their roles and responsibilities and told us that they were supported by their manager.

Wiltshire Council Adult Placement Service (Bourne Hill office)

Detailed findings

Background to this inspection

This inspection was carried out by one adult social care 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 service. The expert by experience gathered information from people who used the service by speaking with them.

We reviewed the Provider Information Record (PIR) and previous inspection reports before the inspection. The PIR is information given to us by the provider. This enabled us to ensure we were addressing potential areas of concern. After our inspection we contacted other health and social care professionals, people using the service and adult placement carers.

We used a number of different methods to help us understand the experiences of people who used the service. This included talking to people, their adult placement adult placement carers and looking at documents and records that related to people's support and care and the management of the service.

We visited Wiltshire Adult Placement Service offices on 7 August 2014. We spoke with six people who used the service and 10 adult placement carers. We also spoke with an adult placement officer, the registered manager and two health and social care professionals who have worked with the service.

This report was written during the testing phase of our new approach to regulating adult social care services. After this testing phase, inspection of consent to care and treatment, restraint, and practice under the Mental Capacity Act 2005 (MCA) was moved from the key question 'Is the service safe?' to 'Is the service effective?'

The ratings for this location were awarded in October 2014. They can be directly compared with any other service we have rated since then, including in relation to consent, restraint, and the MCA under the 'Effective' section. Our written findings in relation to these topics, however, can be read in the 'Is the service safe' sections of this report.

Is the service safe?

Our findings

People who used Wiltshire adult placement service were safe because the service had arrangements in place to ensure people were protected from abuse and avoidable harm.

People we spoke with were all very clear in telling us they felt safe. One person said “I feel safe. I feel involved.” Another person told us “Yes I feel safe here. (Name of carer) is really making me feel safe.”

The risk of abuse to people was minimised because there were clear policies and procedures in place to protect people. Adult placement carers explained that during their induction they discussed safeguarding and their responsibilities with their adult placement officer. They also had the opportunity to discuss or raise any concerns during their three monthly review meetings. Adult placement carers were able to explain how they would recognise abuse and what actions they would take if they thought someone they were supporting was being abused or was at risk. Records contained detailed notes of the meetings held between the adult placement carers and adult placement officers. We saw that during these meetings concerns were raised and solutions discussed.

Adult placement officers had received training from the provider to support them to perform their role. People who did not have the mental capacity to make decisions for themselves had their legal rights protected because staff had received appropriate training. Adult placement officers had received training in safeguarding, the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS). Adult placement officers and adult placement carers we spoke with had a good understanding of how to offer people choices. The registered manager explained the process they would undertake to involve personal and professional representatives should a person be unable to make a decision for themselves. One adult placement carer told us “It’s all about promoting people’s confidence. It is important we sit and have regular chats about what sorts of things they want to do.”

There were risk assessments in place to enable people to be as independent as possible. We saw risk assessments for people who were able to be left alone for designated periods of time. In discussion with adult placement carers they explained how they and the person had been involved

in the risk assessment process. They told us how they would regularly go through what to do in the event of a fire or if someone knocked at the door with the people they were supporting as part of their plan to be left alone. We saw that this was checked during their monitoring visits by the adult placement officers. This meant that people could safely stay at home as they knew what to do should there be an emergency.

People had access to health and social care professionals to support keeping them healthy and safe. One adult placement carer explained how they had raised their concerns about a person they were supporting with the adult placement officer. They had then made a referral to the mental health team to ensure the person received the correct support and treatment.

People were protected by a safe recruitment system. All adult placement carers experienced a thorough approval process before being able to provide support to someone. The process consisted of completing a workbook over a period of time with the support of the adult placement officer. This was usually for a minimum period of six months and consisted of regular meetings to discuss the adult placement carer’s values and experience. It could be slightly less or longer depending on the adult placement carers’ previous experience. The workbook included topics such as safeguarding of vulnerable adults, person centred approaches and health and safety. Once completed adult placement carers would also be interviewed by an independent approval panel consisting of a range of professionals. Records we looked at evidenced adult placement officers and adult placement carers had all completed an application form, had provided proof of identity and had undertaken a disclosure and barring service (DBS) check.

Within the adult placement scheme, the safety of the adult placement carers was also taken in to account. One carer told us “Whenever we need advice or support we just need to ask.” Another carer explained about difficulties they had experienced with some behaviour from a person they were supporting. They told us they had felt “well supported” by the regular visits they had received from the adult placement officer. They had also been able to discuss strategies for keeping them both safe.

Is the service safe?

Adult placement carers had access to an on-call system should an emergency arise out of hours. Adult placement carers told us they could always contact someone if needed. One carer said “I get plenty of support whenever I need it from the team.”

Is the service effective?

Our findings

People spoke positively about the support they received from the adult placement carers. One person told us “I am very settled and happy.” Another person said “I am happier here. It is much nicer than the last place. Everybody is nice to me.”

There were enough skilled and experienced staff to meet people’s needs. People received effective care and support from well supported and trained adult placement carers. There was a thorough induction programme all adult placement carers undertook before being able to support people. Previous experience and any training were taken into account when ‘matching’ people with appropriate adult placement carers. Adult placement carers were able to access training specific to the needs of the people they were supporting. Some adult placement carers said they had been able to attend courses on autism and dementia where required. They told us that if they felt they needed any additional training then they could request this. Training attended by adult placement carers was documented in their personal profiles.

Adult placement officers who supported the adult placement carers were subject to the provider’s recruitment and selection process. They also undertook an induction programme to ensure they had the correct skills and knowledge to support the adult placement carers. The adult placement officers attended training through the provider. The registered manager explained that this was organised centrally and the officers were sent reminders when they were required to attend refresher training. Records showed that training was up to date.

The service matched people to adult placement carers based on people’s needs. One carer explained how carefully the service tried to match people who need extra support with the adult placement carers who want to provide extra support. Another person said “The service works well because they (officers) work hard to match people on both sides. I love swimming, going to the gym and car boot sales and (the person) loves going to these activities with me.”

People had their physical and emotional needs monitored. There were regular meetings between the adult placement

carer and the adult placement officers to monitor the placement and to enable them to respond to any changing needs. There was an annual review which the person attended or a review was held more frequently if required. Care records showed that people had access to healthcare professionals specific to their needs. Adult placement carers explained that where needed they would attend appointments with the people they were supporting. Adult placement carers also told us that they kept a daily check on people’s well-being and noted changes. One carer said that they had noticed a person they were supporting had appeared to be more tired than usual. They had booked an appointment with the person’s GP to have them “checked out.”

Adult placement carers said they felt supported and had access to regular monitoring meetings where they could raise any concerns they had. The adult placement officer also told us they felt supported and had access to regular supervision and appraisal. Records we reviewed confirmed this. One carer told us “Any problems and they (officers) would sort it. It’s a brilliant scheme.”

People had their nutritional needs met. People’s preferences were recorded in their care plan. Adult placement carers explained how they would discuss with the person what food they would like to eat. Where people wanted to they could also shop for their own food as part of being independent. One adult placement carer said “I always ask him what he would like to eat and if he has any special requests. I try to support him to have as much choice in life as possible.” Another carer said “Everyone is different so I always find out what their likes and dislikes are so when serving their meals they would always be happy.” One person we spoke with said “I like fish and chips and (name of carer) will get them for me.”

We received feedback from two health and social care professionals. They were both complimentary regarding the services provided. They said they had always found staff to be very approachable. One health and social care professional said that staff and adult placement carers had a good understanding of the diverse needs of the people they were supporting and that they respected people’s differences.

Is the service caring?

Our findings

People were supported by caring and kind adult placement carers. One person said “I am very well thank you. I like (name of carer) and I like living with her.” Another person said “I am happier here.”

Adult placement carers spoke about the people they supported positively with one carer telling us how providing this type of care had “enriched” their lives. One adult placement carer told us about when the person had first come to live with them. They had asked the person what three wishes they would like. One of wishes the person had wanted was to find their family who they didn’t have any contact with. The carer explained that they had managed to support the person to do this and that they were now in regular contact with their family even attending holidays together. The carer said “just seeing (the person’s) face was so worth it.”

Adult placement carers were aware of the need to respect people’s dignity and privacy. People were able to spend time in their own room whenever they wanted. One person told us they had just come out of their bedroom to speak to us. They said “I have a nice room with my own TV.” When asked if they like to spend time in their room they said “Yes”. They also told us they could spend time with their carer if they wanted. Another carer told us about a situation whereby the person they supported had put on make-up during an external activity. They felt that because the make-up had not been put on properly the person would draw attention to themselves should they go out in the community wearing it. They said they felt this was not very dignified. They sensitively explained to the person about the make-up and supported them to reapply it. This ensured the person was still able to enjoying wearing the make-up but promoted their dignity.

When people were first being introduced to the service adult placement carers told us that they would come for a series of visits before making their decision about if this was the place they wanted to live. These involved initial tea visits leading up to overnight stays. The amount of visits would depend on the person and the carer they were going to stay with. This meant people and adult placement carers had an opportunity to start to build caring relationships before decisions were made. Adult placement carers told us that they continued to develop these relationships by spending time with the person. They said that whilst they

received initial information on the person and their needs this usually changed once they got to know the person. They said they spent time talking to the person and asking them what things they liked or disliked, was there anything that they would like to be doing and promoting choice and independence as much as they could.

A healthcare professional who worked in conjunction with the adult placement service told us they “Provided a person centred approach” and that “Holidays and activities are tailored to people’s individual needs. As are appointments and care.” A social care professional said “We do feel that they provide a person centred service and show a great deal of support to each person.”

Care records were specific to the needs of the individual. They included the person’s routines and what support and care they would like to receive. People had a timetable of activities they took part in. People’s spiritual and cultural needs were also taken in to account. On one person’s timetable it noted that they liked to attend church. When we spoke with this person we asked if they liked attending church. Their response was “Yes, very much.”

There was evidence that people and their families were involved in planning their care. People had signed to say they agreed with the information. There were annual reviews which people attended with their chosen representative. People also completed a yearly questionnaire independently of their adult placement carers. If people could not complete the forms themselves then external support was sought. One question asked if people liked living in their placement and did they get on with the adult placement carers? One person had responded by saying “Yes. They are very nice people.” It also asked if people wanted to continue living at the placement. This meant people were given the opportunity to change where they lived if they were not satisfied with the care they received.

Adult placement carers we spoke with described how they involved people in making decisions about their daily lives. They said that they respected that people might not always make what they considered to be “wise choices” but that this had to be supported and possible consequences of their actions explained. One carer explained that now they were getting older how they needed their own time. (the person) is aware of all of this. “He knows the new people he is moving to live with and is involved in the whole thing.”

Is the service responsive?

Our findings

We spoke with the registered manager who explained the initial process of people moving into a placement and how this was co-ordinated. People had an assessment completed by a social worker prior to them moving into a placement. This assessment would then be transferred into an initial care plan. This information was aimed at ensuring people received consistent care and support when moving into the placement.

We spoke with an adult placement officer who explained about the 'matching' process. They said they would consider the carer's past and present experience when looking for a suitable placement for a person. This was to ensure that adult placement carers had the necessary skills and knowledge required to respond to the needs of the person they were placing.

We spoke with one carer who had recently had someone new come to live with them. They told us whilst they had received an initial care plan they were still getting to know the person. They said they were still "building" the care plan as they got to know the person and their routines. They said that as they got to know the person then the care plan was changed to reflect this information.

We found adult placement carers responded to the health needs of the people they were supporting. One carer explained they had recently had someone new come to live with them. They said on the day the person had arrived they had taken them to hospital as they had concerns with the person's health. Another carer told us they had noticed changes with a person they were supporting, who was appearing very tired. They had asked if the person would like to see their GP. With the person's agreement they had supported them to attend the appointment to discuss their health needs.

People could talk to a range of people if they had any problems. People told us they would know who to talk to if

they had any worries or concerns. They had a copy of the complaints procedure. The complaints procedure was written in a format that people using the service would understand.

People's care and support plans contained information relating to activities people enjoyed taking part in. People took part in activities either in their own home or within their community. One carer told us "(the person) has a great social life. They have an advocate involved which we helped organise. This works well for them." Another carer told us the people they supported were out during the week attending various activities. Because of this they said Saturday was always a "free" day where people could choose what they would like to do. They said they had gone out on various day trips including a balloon fair and trips to the seaside.

Adult placement officers met with the adult placement carers every three months. This would be more frequently or less often depending on the needs of the person. This gave adult placement carers the opportunity to discuss what was working well or not working well with the placement. This also afforded them the opportunity to discuss any changes needed to respond to situations where required. We saw records of meetings held where the carer had discussed a situation regarding how the person they were supporting was dressed. They had advised the person of the consequences of wearing an inappropriate outfit. The adult placement officer had agreed that whilst the person can make choices on this occasion the carer had been correct in encouraging the person to wear something more suitable.

Adult placement carers we spoke with told us they felt supported to respond to the needs of the people they were supporting. One carer told us "I think the back-up they (the service) provide is very good. We have three monthly reviews and in-between phone calls." They told us of a recent situation where they had been supported to work through the situation and find solutions. They said "They were great, all the staff."

Is the service well-led?

Our findings

The aims and values of the adult placement service were clearly explained to adult placement carers during their induction period. Adult placement carers we spoke with were positive about their role with supporting people within an adult placement setting. Adult placement carers told us about the importance of respecting people's rights to make choices and how they promoted people's independence. One carer said "I love it." They spoke about how they had supported the person to be more independent. They said "It took a year but (the person) can now put their own make up on." Another carer told us "It's a brilliant scheme."

There were effective systems to monitor the care people received and plan any improvements. People received a yearly review. The views of everybody involved were sought and recorded on the review paperwork. This included family, friends and health professionals. People were also asked to complete an anonymous 'customer' questionnaire each year. We saw that the questionnaires sent to people were produced with pictures, symbols and written in plain English. Adult placement carers had three monthly monitoring visits with the adult placement officers. Risk assessments were regularly reviewed and updated to support people's changing needs, whilst still promoting people's independence.

Adult placement officers and the registered manager had regular team meetings where they could discuss the service direction and raise any concerns they had. The adult placement officers also received regular supervision and

appraisal from the registered manager. We saw minutes of a recent meeting where the Deprivation of Liberty Safeguards had been discussed and its implications for the people using the service.

We saw that the provider had robust policies and procedures in place to support the service. We saw several examples of policies such as recruitment and selection, safeguarding and risk assessment. These policies were comprehensive and regularly reviewed. The registered manager explained that because the service was being renamed they were currently reviewing their policies to include this.

There was a formal system in place for the adult placement officers to record accidents and incidents. However the same system did not apply to adult placement carers. Whilst adult placement carers would inform the adult placement service of any incidents, these were not formally recorded with details of the incident and actions taken. This meant that it would be difficult to identify and patterns or trends if incidents were occurring regularly. There was also no evidence that lessons could be learnt on how best to support the person to avoid further incidents. We spoke with the registered manager regarding this who agreed that they would implement a form for adult placement carers to complete.

We discussed with the registered manager what plans they had to support and improve the service. They told us they were hoping to expand the number of adult placement carers they had to support with choice and availability for people who wished to use the service. They were also hoping to raise awareness of the adult placement service to promote understanding of the service and build links with the local community.