

Glenelg Support Limited

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Inspection report

Aintree Building
Aintree Way, Aintree Racecourse Retail & Bus Pk
Liverpool
Merseyside
L9 5AQ

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29 October 2019
31 October 2019

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Ratings

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

Summary of findings

Overall summary

About the service

Glenelg Support Limited is a supported living service providing personal care to people living in their own homes. The service supports people who have a learning disability, physical disability and/or mental health needs. At the time of our inspection the service supported 81 people living in their own homes.

People lived in a variety of domestic-style properties, which were based within the local communities, in keeping with other neighbouring properties and had access to local amenities and transport. People shared the communal parts of their homes, such as living rooms, kitchens and bathrooms and all had their own bedrooms.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People said they felt safe and happy being supported by staff. One person commented, "I'm happy where I'm living, I can talk to the staff, I trust them and they listen to me." People were safeguarded from the risk of abuse and the service had engaged with the people it supported to help them understand what safeguarding is and take an active role in this area.

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 and their relatives gave us positive feedback about the staff at the service. One person said, "[The staff] are all kind and wonderful. The staff understand me and my needs, they support me with everything, they're like my family." Staff clearly knew the people they supported well and people were comfortable and happy with the staff supporting them.

People's care plans were person-centred, detailed, regularly reviewed and gave staff the information they need to safely and effectively support people. People were supported to access their local community and to pursue their hobbies, interests and job opportunities.

There was a positive, caring and person-centred culture amongst the staff at the service. The service valued people's views and experiences and used their feedback to help develop 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

The last rating for this service was good (published 23 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Gleneig Support Limited

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 Care Act 2014.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in '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.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a relatively small service and we needed to be sure that the registered manager would be in the office to support the inspection.

We visited the office location on 29 October 2019, met with six people at three addresses and made telephone calls to three relatives on 31 October 2019.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the relevant local authorities. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used

all of this information to plan our inspection.

During the inspection

We spoke with seven people who were supported by the service and three relatives about their experience of the care provided. We spoke with 12 members of staff including the registered manager, operations manager, support workers and other staff.

We reviewed a range of records. This included three people's support plans and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision and appraisal records. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People said they felt safe and happy being supported by staff. One person commented, "I'm happy where I'm living, I can talk to the staff, I trust them and they listen to me."
- The service had systems in place to safeguard people from the risk of abuse.
- The service had engaged with the people it supported to help them understand what safeguarding is and take an active role in this area. For example, there was a safeguarding steering group which met regularly and planned initiatives raising awareness both with other people supported and in the local community.
- Staff had received training on this topic and information about how to raise safeguarding concerns was readily available.
- The service took appropriate action when any such concerns arose.

Assessing risk, safety monitoring and management

- The risks associated with supporting people were effectively assessed and managed.
- Staff were able to seek senior support and advice on any safety concerns at any time, including outside regular office hours through an on-call system.
- The service had a business continuity plan to ensure the impact of any unexpected events or emergencies could be safely and effectively managed.

Staffing and recruitment

- Staffing levels were assessed and planned in line with people's support needs, which included ensuring people had the support they needed to access the local community and pursue their hobbies and interests.
- Staff were safely recruited by the service, ensuring that only people who were suitable to work with vulnerable adults were employed.

Using medicines safely

- Medicines were safely administered, stored and recorded by staff who had the required knowledge and skills.
- Records we reviewed showed that people were receiving their medicines as prescribed.
- The service had quality monitoring systems in place to make sure the quality and safety of medicines administration was maintained.

Preventing and controlling infection

- People were supported by staff to keep their homes safe and clean.
- Staff had received training on infection prevention and control and had access to personal protective equipment (PPE) for when this was needed.

Learning lessons when things go wrong

- Accidents and incidents were managed effectively by staff at the service.

Staff had access to relevant policies and procedures to help them to manage any such situations.

- Accidents and incidents information was reviewed by the registered manager to help identify any emerging patterns or trends that required further action.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained 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 effectively assessed before being supported by the service. This ensured the service and the staff it employed could safely and effectively meet people's needs.
- People's needs in relation to equality and diversity were considered during the assessment and care planning process, such as age, disability and religion.

Staff support: induction, training, skills and experience

- New staff were supported with a thorough induction process, which included regular performance reviews and competency assessment.
- Staff were well-supported with a wide range of training and were encouraged to develop their skills. Staff also spoke positively about the quality of training available to them at the service.
- Staff were up-to-date with their training and this data was carefully monitored to ensure this was maintained.
- Staff were supported in their roles with regular supervisions and annual appraisals, helping to ensure there were open and ongoing discussions about staff performance and other work-related and wellbeing issues.

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

- People were supported to maintain a healthy and balanced diet.
- Staff were knowledgeable about people's individual dietary needs and preferences and we saw this information was also included in their care plans.
- Staff supported people to choose, shop for and prepare their own meals and drinks as independently as possible.

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

- People were supported to access healthcare services when needed to maintain their health and wellbeing.
- Staff also supported people with active and healthy lifestyles. For example, encouraging people to make healthy choices when supporting them to go shopping for food and drink.
- People's care plans contained important information about their health needs along with the support they required to manage any such needs.

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.

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. Where people may need to be deprived of their liberty in order to receive care and treatment an application can be made to the Court of Protection who can authorise deprivations of liberty

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People's consent was sought in line with the principles of the MCA.
- The service had systems in place to ensure people who lacked the capacity to make specific decisions were supported in the least restrictive ways possible.
- Applications and authorisations for people who had restrictions placed on their liberty were effectively monitored and managed.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained 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

- People and their relatives gave us positive feedback about the staff at the service. Comments included, "Glenelg are wonderful, the staff are very nice and caring and we know each other well" and "[The staff] are all kind and wonderful. The staff understand me and my needs, they support me with everything, they're like my family."
- Staff and people supported by the service had developed positive and caring relationships; staff clearly knew the people they supported well and people were comfortable and happy with the staff supporting them.
- People's equality and diversity needs were appropriately considered and met as part of the care planning process. For example, one person who had non-English cultural heritage was supported to get involved with their cultural community throughout the year.

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

- People and their relatives were given the opportunity to share their feedback about the care provided by the service. They told us they felt comfortable doing so and any issues that had been raised were listened to and addressed.
- People were supported to make choices about their care and other things that were important to them, such as how they spent their time, what to spend their money on or how they wanted to decorate their home.
- People and their relatives were involved in making decisions about their care and they said there was good communication between them and staff.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us staff treated them with dignity and respect. One person said, "The staff are respectful and they are funny, I get on well with them."
- Staff understood the importance of respecting people's privacy and were able to give examples of how they maintained people's dignity, such as ensuring people's dignity was not compromised whilst assisting them with washing and dressing.
- People's confidential information, such as care plans, was stored securely and only people who required access could do so.
- Staff were enthusiastic about supporting people to be as independent as possible and were proud of the achievements people had made. For example, with the support of staff one person had developed the skills and confidence to make their own hot drinks and complete some cleaning tasks unassisted.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained 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 person-centred, detailed, regularly reviewed and gave staff the information they need to safely and effectively support people.
- People and their relatives were involved in the care planning and review process to ensure people's care plans were person-centred and reflective of their needs and choices.
- The detail included in people's care plans enabled staff to get to know the people they supported, things that were important to them and what they enjoyed doing.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's care plans contained detailed information about their individual communication needs, methods and preferences.
- Staff communicated with people in ways that were tailored to people's individual needs and in which they could understand. Examples of this included, the use of pictorial aids to help people communicate their choices and feelings and other visual prompts.

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

- Staff supported people make new friendships through social activities, along with assisting them to maintain relationships with family and existing friends.
- People were supported to access their local community and to pursue their hobbies and interests. For example, one person had been supported and encouraged to learn how to cook by attending a cookery school.
- The service had also supported some people to find jobs. One person told us how much they were looking forward to starting a new job and how grateful they were to staff for helping them with this.
- People's individual social, cultural and spiritual needs were supported by the service. Examples of this included, assisting people to attend relevant places of worship and supporting dietary needs associated related to a person's faith.

Improving care quality in response to complaints or concerns

- People and their relatives told us they knew how to make a complaint and would feel happy to do so. One relative commented, "I feel very comfortable raising any issues with staff."
- Complaints were appropriately documented and responded to in a timely and professional manner.

End of life care and support

- None of the people supported by the service were receiving end of life care at the time of our inspection and this was a relatively rare occurrence for the service. However, we saw the service had previously effectively supported someone at the end of their life, including working in partnership with relevant health professionals to ensure their end of life care needs were effectively met.
- We discussed this issue with the registered manager and highlighted that the service could take a more proactive approach to planning and discussing people's end of life care wishes.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on their duty of candour responsibility

- People and their relatives told us they felt the service was well-led. One relative said, "Good communication with office staff, the registered manager is involved lots and any issues raised get listened to and dealt with."
- There was a positive, caring and person-centred culture amongst the staff at the service.
- The registered manager understood their responsibility regarding the duty of candour and there was an open and transparent culture at the service.

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

- The service had a very experienced and passionate registered manager.
- The service was meeting its obligations to display the ratings from the last CQC inspection at the office and on its website, as required.
- The registered manager had notified the CQC of all significant events which had occurred in line with their legal obligations.
- The service had a clear governance structure in place to support staff and maintain quality, along with a range of regularly reviewed policies and procedures in place to help guide staff.

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

- The service valued people's views and experiences and used their feedback to help develop the service. For example, people had started taking an active role in the staff recruitment and selection process. We asked one person how they felt about this and they said, "I feel privileged and proud to be involved."
- Staff at the service prepared a quarterly newsletter for people to share information about people's personal achievement, things people had been doing and upcoming events.
- Staff said they were well-supported and listened to by senior staff. They also said they felt involved in business decision-making, where possible.

Continuous learning and improving care

- The service had robust systems in place to monitor, assess and improve the quality of service being provided. For example, the service held various forums throughout the year during which staff were able to identify and address any areas for development and improvement.

- Staff competency and performance was regularly assessed to maintain quality and highlight any areas requiring further learning and development.
- The registered manager was a member of several local provider forums, which offered opportunities to share ideas for service improvement and best practice.

Working in partnership with others

- Staff worked well in partnership with other health and social care professionals to ensure people's health and wellbeing was maintained.
- Staff made referrals to other health services when necessary and ensured these were appropriately followed up on.
- The service had received positive feedback from one professional, who wrote, 'I would like to offer a thank you to [staff member] and her team for working so positively with us and more specifically how they have embraced recommendations, implemented positive changes independently, and for their clear values base in working with people who have a learning disability.'