

Support4u Ltd

Support 4U LTD

Inspection report

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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:

Support4U is a domiciliary care agency registered to provide personal care to people living in their own homes. At the time of the inspection five people were being supported to live independently in a supported environment. The service has been developed and designed in line with principles that reflected the need for people with learning disabilities and autism to live meaningful lives. This included control over choice and independence. Each person had their own accommodation with their own tenancy.

People's experience of using this service:

People told us they felt safe and staff knew how to protect people from the risk of harm or abuse.

People's risks were assessed, monitored and managed.

People were supported by enough numbers of staff that had been safely recruited. Medicines were given as prescribed.

Accidents and incidents were monitored and reviewed. The registered manager informed us about significant events as required by law.

People were cared for by staff who had the skills and knowledge to meet their needs, Staff understood their roles and felt supported by the management team.

Staff sought people's consent before support was provided. People were supported to access healthcare agencies when required.

People told us staff were kind in their approach. People told us their dignity and privacy was maintained and they were involved in the planning and review of their support.

People received care that was responsive to their needs. Support records showed people were fully consulted about all aspects of the support provided.

The provider had a complaints process in place which people were aware of and knew how to access. The complaints procedure was also available in an easy read summary to aid communication for people.

The provider had quality auditing and monitoring systems in place which included monitoring people's progress. Reviewing the service delivery to ensure people's safety. Staff meetings were held, and feedback sought from people, so lessons could be learnt if needed. The management team were approachable and the culture of the organisation open and friendly.

Rating at last inspection:

This was the first inspection of the service since registration on 29 August 2018.

Why we inspected:

This was a planned inspection

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Follow up:

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

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our Safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our Effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-Led findings below.

Support 4U LTD

Detailed findings

Background to this inspection

The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. 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 is a domiciliary care agency and is registered to provide personal care. Not all people using the service is supported with personal care. The aim of the service is to provide support, so people can live independent in a support accommodation with support.

Notice of inspection:

We gave the service 48 hours' notice of the inspection visit because we needed to be sure that they would be in.

The service had a manager registered with the Care Quality Commission. This means they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

What we did:

We reviewed information we had received about the service. This included details about incidents the provider must notify us about, such as allegations of abuse. We sought feedback from the local authority and other professionals who work with the service.

We reviewed the care records of four people to see how their care was planned and delivered, as well as their medicine administration records. We looked at four recruitment, training and supervision records for staff. We also looked at records which supported the registered manager and the provider to monitor the quality and management of the service. We spoke with four people, and five staff, the registered manager and the operation manager. At the time of the inspection the agency was supporting five people.

Inspection site activity started on 05 June 2019 and ended on 10 June 2019 It included telephone calls to people, so they could share their views about the service provided. We visited the office location on 05 June 2019 to see the registered manager and to review care records, policies and procedures. Two people visited the office to speak with us.

Details are in the key questions below.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People spoken with told us they felt safe because they received safe care and could speak with staff if they needed to. One person told us, "Staff are really good with me they take me out, because I get in with the wrong crowd, so they make sure I am safe."
- Staff received safeguarding training that was regularly updated. Staff were clear about the action to take if concerns were identified that would need further investigation. One staff member told us, "We can ask for training if we wish to gain further knowledge and update our skills. We also undertake specialist training if required."
- Detailed records were kept of safeguarding concern and alerts and where necessary information was shared with the local authority and the Care Quality Commission (CQC)

Assessing risk, safety monitoring and management

- People told us they had discussed risks with the management and staff told us risks to people's health and well-being had been assessed.
- Staff understood how to care for people safely while supporting positive risks that people wished to take to support their goals and aspirations. Support plans were clear and included the decisions people chose. One person told us, "I go to the gym, and out and about with support from staff. I have no restrictions in what I want to do or the risks I want to take because I am supported."
- Staff we spoke with had good knowledge of people's individual risks when they were supporting them.
- People had their health care needs monitored and risks to their health and behaviour were regularly assessed by staff with the right level of competency and skill to keep people safe. One staff member told us, "We are very clear that we support people to make daily choices we also assess the risk and support the persons needs to enable them to take the risk safely."

Staffing and recruitment

- There was enough trained and skilled staff to assist people with their support needs.
- The registered manager completed a detailed assessment of people's health and support needs to ensure they could be met by the level of care staff available. Staff levels were then based on people's support needs.
- The provider had safe recruitment practices in place. Staff were recruited by the service following a strict process. All staff had been checked by the disclosure and barring service (DBS). All staff shadowed an experienced member of staff, references and previous employment history was obtained. This ensured only suitable people were employed to support people.
- People who used the service were involved in the interview process, so their views could be sought. One person told us, "I was on an interview where I checked people that I might like to look after me."

Using medicines safely

- People told us they were supported with their medicine as prescribed and medicine were stored safely in their homes.
- There were procedures in place to support the safe administration of medicine if required and there was a policy which covered the process staff needed to follow. One person told us, "I take my own medication, staff help me to reorder so I don't run out." We looked at medication administration records which were clear about the medication that was being taken and the specified times.
- Staff were confident they knew how to administer medicines safely and knew what to do if there were administration errors.
- Staff who supported people with their medicines had been trained and their competence assessed.

Preventing and controlling infection

- Systems were in place to safely manage and control the prevention of infection. Staff had received training and personal protective equipment (PPE) was available.

Learning lessons when things go wrong

- There was a process in place to monitor, review and manage incidents and accidents if they occurred. 'We saw recorded evidence of an incident where the process had been followed correctly'. This meant the registered manager was able to assess for patterns or trends for further analysis. The registered manager and service operation manager was able to show how lessons had been learnt through identifying practice issues and how improvements had been made.

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.

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 we spoke with told us that they were very happy with the staff. One person told us, "I could not do what I want without them [staff], they make sure I am okay, safe and I am well looked after." Another person told us, "I am living my life the way I want, with staffs support I can."
- People's needs had been assessed, monitored and reviewed so the support they received met their requirements. The assessments seen were led by the individual person which meant that any changes were fully discussed with the individual and changes made with consent.
- Peoples comments demonstrated that they felt staff were competent in their role and provided good care and support.
- Staff and people spoken with felt that communication was good within the team and with the people they supported.
- People's needs in relation to their rights, choices, gender, age, culture, religion, and disabilities were discussed and included in people's support plans.

Staff support: induction, training, skills and experience

- People spoken with told us that they felt staff were trained to meet their support needs.
- Staff had received training to meet the needs of the people they supported. This include completing the core mandatory training required. All staff worked towards the Care Certificate. The Care Certificate is a nationally recognised set of standards for staff working in care settings.
- Staff told us they felt supported by the management to complete training to enhance their skills. One staff member told us, "I work with skilled staff, there is good communication between us, we are a team." Another staff member told us, "Management provides any training we ask for. The training is very good, I feel it gives me what I need to support the people."

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

- People told us they were supported when they needed assistance with food or drink.
- Staff told us they supported people to go shopping. People using the service did not require support when eating or drinking.

Staff working with other agencies to provide consistent, effective, timely care

- Staff communicated effectively with each other. There were systems in place to ensure meetings were held with staff, daily care records were checked, staff shared and gathered information from people daily about the support they wanted. People's support plans linked to their individual support arrangement; including support from relatives and other professionals.

- Staff told us, where advice was provided by a professional it was included in the persons support plan and reviewed and discussed with the person to ensure they fully understood.
- People were supported to access health care professionals when required. For example, doctors, opticians, dentist.

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

- The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 decisions, any made on their behalf must be in their best interests and as least restrictive as possible.
- People told us staff enabled them to make independent choice about their life and activities they wanted to do.
- The registered manager told us, "The support provided is to enable and support individuals to manage everyday living skills and independence." One person told us, "I choose what I want to do, and the staff support me."
- Staff we spoke with had a clear approach of how to gain a person's consent and ensure their wishes were respected. One staff member told us, "I support [named person] to do as many activities that they want to do, if they want to go to a disco, pub or the gym then I support them to do that. I am led by what [named person] wants to do and I love seeing [named person] achieve this."
- There was clear procedures in place to monitor and review people's ability to make choices and give consent.

Is the service caring?

Our findings

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

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

- People told us they were supported to express their views and were involved in making decision about their support, One person told us, "Staff do as I ask, they are really good they treat me as an equal and respect me." A staff member told us, "The main aim of the service is to promote people's wellbeing, autonomy and choice."

Ensuring people are well treated and supported; respecting equality and diversity.

- People spoke positively about the caring attitude of staff. One person said, "Yes staff are nice and caring, very good, in fact I could not wish for better." Another person told us the registered manager was a 'diamond' and staff were very kind and considerate.
- Staff spoke with kindness about the people they supported and knew people's individual choices and preferences well.
- Staff told us they had time to complete the tasks expected because they had set duties each day so there was no rushing or extensive travelling. They were allocated one place to work and supported people who lived in the supported accommodation. All staff spoken with were very passionate about their work and the people they supported.
- Staff were clear about people's equality and diversity. One staff member told us, "It does not matter what religion, gender, we will support them as individuals."

Respecting and promoting people's privacy, dignity and independence

- People had safe appropriate care and support because people's needs were established from when they were initially referred or began to use the service.

- People's right to confidentiality and privacy was respected.

We spoke with four people during our visit and each person told us staff were respectful and treated them well. One person told us, "They respect me, knock on my door and wait till I tell them to come in."

- People's confidential information was securely stored.
- People were supported to maintain their independence. One person said, "[Staff] let me do what I can for myself." Staff explained that they encouraged people to do as much as they could for themselves.

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's care plans reflected their personal histories, care preferences, support needs and goals.
- People were involved in planning the support they wanted, and the registered manager regularly reviewed each person's support with the person to ensure that their support was led by them.

● Staff were able to provide personalised support as there was enough information for them to understand what was important to people. For example, the importance of going to the gym for one person. Another person enjoyed motor sport and would go to racing events.

● Support plans we looked at were up-to-date, personalised and reflective of people's needs.

● Information about people's health and support needs was available for staff to refer to for people to receive safe care. All professionals involved in people's life and support were documented so staff could support the person to contact them if needed.

Improving care quality in response to complaints or concerns

● Systems were in place to manage and respond to complaints, when needed, and to take any learning from concerns that were raised. The complaints information was shared with people in a format that was suitable to people's individual communication needs.

End of life care and support

- There were no people using the service who required this level of support at the time of our inspection.

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People felt able to approach the registered manager and all staff with any issues they had. One person told us that the registered manager visits him and sometime takes him out. All the people we spoke with were very positive about the service and the staff team.
- The registered manager and staff team demonstrated a clear commitment to promote and motivate person centre support and a caring culture throughout the service. Staff were motivated and passionate about making a difference to people's lives, choices and independence.

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

- The provider notified CQC of events such as safeguarding's and serious injuries as required by law.
- A range of audits were completed to ensure that the service provided quality care in all aspects of support.
- The registered manager understood their responsibilities to monitor the governance of the service which included the duty of candour, which means that the registered manager is open and transparent.
- The registered manager assessed the quality of the service provided. Assessments were completed to ensure peoples support needs were being met. This also gave the registered manager the opportunity to assess areas that needed improvements.
- There was a positive workplace culture at the service, staff worked well together and felt supported by the management team. People told us there was good interaction from staff and the choices they made were supported. There was a consistent approach to gaining people's views.

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

- Staff and management were clear about their roles and responsibilities. One staff member told us, "We aim to support people to live a fulfilled life irrespective of their background or disabilities, I think we do that."
- People told us that they were supported by staff to enable them to be independent. The service acted to protect people and staff from discrimination.
- The management team knew the requirement of the Equality Act 2010 and how people's individual differences may be considered protected characteristics. For example, the service respected people's gender, disabilities and the choices they made.

A variety of meetings were held with people demonstrating how the service engaged and sought their views about the service they received.

Continuous learning and improving care, working in partnership with others

- Training was ongoing for both the management team and staff to maintain and develop their knowledge to ensure the support provided continually reflected a person's needs.
- The provider worked in partnership with other professionals to ensure people received the support they required.

Working in partnerships

- The service had good relations with external agencies that were also involved in the support people received. For example, mental health teams, psychiatric and doctors who were involved in people's support.