

Gateshead Council

Shared Lives

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

Shared Lives Gateshead provides personal care to 80 people with a learning disability at the time of the inspection.

Shared Lives Gateshead is a shared lives scheme which provides people with long-term placements, short breaks and respite care, within shared lives carers (SLC) own homes.

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

People received good care, from a kind and caring team of shared lives carers.

People and carers said the service was safe. Shared lives carers knew how to report safeguarding and whistle blowing concerns. They confirmed they felt confident to do so. The provider recruited new shared lives carers safely. People received their medicines when they were due. The service logged and investigated incidents and accidents.

Training was up to date and shared lives carers received good support. Shared lives carers supported people to have enough to eat and drink and to access healthcare services.

People were supported to have maximum choice and control of their lives and shared lives carers supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The service fully assessed people's needs which formed the basis for developing personalised care plans. Shared lives carers supported people to follow a wide range of activities and attend events. The provider investigated complaints fully; although these were not directly related to the care provided.

The provider had worked with stakeholders to improve the quality assurance processes. These were now effective in identifying areas for improvement and learning lessons. People, relatives and carers described the registered manager as supportive and approachable. People could provide feedback about the service; their views were listened to and acted on.

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.

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

Rating at last inspection (and update)

The last rating for this service was requires improvement (published 15 November 2018). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

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 ●

Shared Lives

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

One inspector carried out this inspection.

Service and service type

Shared Lives Gateshead is a shared lives scheme, they recruit, train and support self-employed shared lives carers (SLC) who offer accommodation and support arrangements for vulnerable adults within their own family homes in the community.

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 a short period notice of the inspection because we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 14 November 2019 and ended on 2 December 2019. We visited the office location on 2 December 2019.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 used the service and five relatives about their experience of the care provided. We spoke with seven shared lives carers and five other staff including senior managers, the provider, registered manager, a senior care worker and a support worker. We reviewed a range of records. This included three people's care records and multiple medicine records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were 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 the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems to help keep people safe. Relatives and shared lives carers confirmed the service was safe. One relative commented, "[Family member] is definitely safe, they are lovely."
- The provider continued to investigate safeguarding concerns thoroughly; referrals had been made to the local authority and other agencies, such as the police, where needed.
- Shared lives carers knew how to report safeguarding concerns and follow whistle blowing procedures. They confirmed they would not hesitate to do so if required. One shared lives carer told us, "I have not used it [whistle blowing procedure] but I would definitely raise concerns [if required]."

Assessing risk, safety monitoring and management; Preventing and controlling infection

- The service managed risks safely. Where potential risks were identified, a risk assessment was carried out.
- An environmental assessment was completed to check people would be staying in a safe and clean environment.
- The provider had procedures to ensure people continued to receive care in emergency situations.

Staffing and recruitment

- Shared lives carers provided consistent and reliable care. One person commented, "I see the same carers all the time."
- The provider followed safe recruitment practices when recruiting new shared lives carers.

Using medicines safely

- The service managed medicines safely. People were supported to take their medicines when they were due; shared lives carers kept accurate records of the medicines people had received.
- The provider assessed shared lives carers to check they were competent to give people medicines.
- The provider had commissioned an independent pharmacist to review the medicines administration processes.

Learning lessons when things go wrong

- The provider had effective systems to log and investigate incidents and accidents.
- The provider monitored these to identify trends and patterns.

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 requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

At our last inspection the provider had failed to monitor training and supervision for shared lives carers. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- The provider implemented new systems to check shared lives carers received the training and support they needed.
- Shared lives carers confirmed they received good support. One shared lives carer commented, "I am very supported. All I have to do is pick up the phone and someone gets back to me."
- Training and supervisions were up to date.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The provider fully assessed people's needs to determine the care they wanted; this included reviewing their preferences, such as religion and social interests.
- The service used the assessment to develop detailed and personalised support plans.

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

- Shared lives carers supported people to have enough to eat and drink. This included teaching people cooking skills and offering advice to help promote their independence.
- The specific support people needed to meet their eating and drinking needs was detailed in their care plan.

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 health care services; care records provided details of health professionals involved with each person.
- People accessed the service following a structured transition, which included input from professionals involved in their care.

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

- The service was flexible and adapted quickly to meet people's changing 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The provider followed the requirements of the MCA.
- Shared lives carers had a good understanding of people's needs; they used this to support people to make as many of their own decisions as possible.

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 the same. 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 received good care and support; shared lives carers knew people's needs well. The service regularly received compliments about the care provided.
- People and relatives gave only positive feedback about the service. Their comments included, "I get on well with [shared lives carer]. I struck lucky because they help me" and "They are lovely, everything is excellent."
- People and shared lives carers had developed caring relationships.

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

- Shared lives carers encouraged people to be involved in making choices and decisions.
- The provider assessed people's communication needs. Shared lives carers had access to people's communication profiles to guide them about the support people needed.
- Relatives and independent advocates were involved in decision-making depending on people's needs.

Respecting and promoting people's privacy, dignity and independence

- Shared lives carers treated people with dignity and respect. One person told us, "[They treat me] with great respect. They are like friends, we have a very good relationship."
- The service promoted and encouraged people's independence. Some people accessed the local community independently.

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 the same. 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; End of life care and support

- The provider effectively planned people's care based on their needs and preferences. People's care plans were detailed and person-centred. They provided shared lives carers with specific guidance on how people wanted to receive their care.
- Care records included a section called 'about you' which gave shared lives carers information about what was important for each person.
- The provider reviewed support plans regularly, so they reflected people's current needs.
- People could discuss their future care needs and outcomes. These were recorded in specific care plans.

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.

- The provider had a clear understanding of the AIS. They made information available to people about AIS in an easy read format.
- Each person had a communication profile which identified the support they needed in this area.

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

- Shared lives carers supported people to participate in a wide range of activities and attend events linked to their interests. Some people accessed college courses and employment opportunities. This enabled people to maintain and develop social relationships and to access the local community.
- Activities included arts and crafts, shopping, going out for lunch and attending sporting events. One relative commented, "Whatever [family member] wants to do, they make sure [family member] can do it."

Improving care quality in response to complaints or concerns

- The provider had an effective and accessible complaints process. Previous complaints had been logged and fully investigated, although these were not related to the care provided.
- People and relatives gave only positive feedback about the service. One person said the service was, "High quality, exemplary. I have no complaints at all."

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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care; Working in partnership with others

- The provider had developed good systems to improve the service. They worked in partnership with local commissioners, national organisations and peer services to review the service.
- The provider had improved the quality assurance processes so there were regular checks on people's care. These were effective in identifying and resolving issues and sharing lessons learnt.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The service had a clear focus on meeting people's individual needs, working towards their identified outcomes and promoting their independence. A shared lives carer told us, "[Person] has come on leaps and bounds." They described how they were now using public transport independently to access the local community.
- Shared lives carers and other staff felt valued. They commented, "I get great support from the whole team."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager informed the CQC about significant events.
- The registered manager was supportive and approachable. One person told us, "[Registered manager] is very nice, very easy to get along with." A shared lives carer commented, "[Registered manager] is always at the end of the phone."

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

- People and shared lives carers could share their views about the service.
- The provider consulted people to gather their views about the service. People gave positive feedback during the most recent consultation. For example, people confirmed they were respected and supported to make choices about their care and support.