

Creative Support Limited

Creative Support - Maytree Court

Inspection report

Maytree Court
Fazakerley
Liverpool
L10 4AB

Tel: 01515216754
Website: www.creativesupport.co.uk

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06 February 2019
13 February 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:

Maytree Court is a supported Living Service which provides personal care and support with daily living for people living in their own homes. Not everyone using the service received a regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. Fourteen people were in receipt of a regulated activity at the time of this inspection.

The service had been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with a learning disability were supported to live as ordinary a life as any citizen.

People's experience of using this service:

People received personalised care and support specific to their needs and lifestyle choices. People's needs were assessed and planned for with their involvement. Each person had a care plan that contained information about how their needs were to be met.

Systems for assessing and monitoring the quality and safety of the service were in place within the service. People and family members described staff as approachable and supportive. Systems were in place to gather people's views on the service.

People were treated with dignity and respect and felt the service was caring towards them. Staff knew people well and knew their lifestyle preferences. Information was available in different formats to meet people's individual needs. People and their family members provided positive feedback about the support they received and how they were treated. Staff supported people to maintain their independence within their own home and maintain a community presence. People were asked for their opinions on the service and had information as to how to make a complaint if they were not happy.

People were protected from abuse and the risk of harm. Staff had received training in safeguarding and knew who to contact if they had any concerns about a person's safety. People's medicines were managed by staff who had received appropriate training. Safe recruitment procedures were followed so that suitable staff were employed. Staff received the training and support they needed for their role. Staff clearly understood and respected people's rights to make their own decisions.

Rating at the last inspection: This was the first inspection of this service.

Why we inspected: this was a planned inspection. The rating for this service is Good.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our 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 the safe section below.

Is the service effective?

Good ●

The service was effective

Details are in the Effective section below.

Is the service caring?

Good ●

The service was caring.

Details are in the Caring section below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our Responsive section below.

Is the service well-led?

Good ●

The service was well-led.

Details are in the Well-led section below.

Creative Support - Maytree Court

Detailed findings

Background to this inspection

The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

This inspection was carried out by one adult social care inspector and one assistant inspector and took place on 6 and 13 February 2019. The visit on 13 February 2019 took place during the evening to speak with people who used the service.

Service and service type:

Creative Support – Maytree Court is a supported living service that provides care and support to people in their own homes.

The registered manager of the service had recently left their employment. This means that the registered provider is 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 visit because we needed to be sure be sure that someone would be in the office to support our inspection.

What we did:

Before the inspection we reviewed the information we held about the service. This included the statutory notifications sent to us by the registered provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send to us by

law. We used all of this information to plan how the inspection should be conducted.

During the inspection site visit we spoke with six people who used the service, two family members and seven staff. In addition, we spoke with the area manager and director for the service. We looked at the care records belonging to six people, the recruitment records of six staff, training and other records relating to the management and quality monitoring of the service.

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

- People were supported to keep safe by system, policies and procedures to safeguard people from harm.
- To maintain people's safety and promote staff awareness staff received regular supervision and training.
- Staff completed safeguarding training and knew what action to take to safeguard people.
- Records relating to people who used the service were clearly written and contained detailed information. These records were kept securely.
- People told us that they felt safe using the service.

Assessing risk, safety monitoring and management

- People were enabled and supported to take positive risks with appropriate care planning and support. This enabled people to have maximum control over their lives wherever possible.
- Systems were in place to monitor and plan for people's changing needs.
- Records of incidents were used to identify any trends to help minimise reoccurrences. For example, when a person challenged the service and posed a risk to themselves or others.
- Risk assessments were completed and measures put in place to reduce the likelihood of harm to people.
- Identified risks were regularly reviewed and care plans updated where necessary. People's choices and freedom were fully respected in the development of risk management plans.
- An out of hours on-call system was in place to offer support to staff outside of general office hours.

Learning lessons when things go wrong

- Systems were in place to identify and drive improvement when things went wrong.
- The registered provider had a system in place to monitor all accidents incidents and understood how to use them as learning opportunities. For example, following a specific incident staff were given access to an alarm system to summon extra support if required.
- Risk assessments and care plans were reviewed following incidents to prevent re-occurrence.

Staffing and recruitment

- People received support from the right amount of suitable staff. Recruitment checks took place to assess the suitability of applicants before they were offered a job.
- People received the level of staff support in line with their assessed needs. Where needed staff levels would be adjusted to ensure people were kept safe.
- People told us that they received care and support from staff who were "Good", "Nice" and "Funny." □

Using medicines safely

- The management of medicines was safe. Staff completed medication training and their competence was checked prior to them administering people's medicines.

- Staff had access to procedures and guidance for the safe administration of people's medicines.
- People were encouraged to manage and maintain their independence wherever possible with the management of their medicines. People told us they were happy with the support they received to take their medicines.

Preventing and controlling infection

- The service had systems in place to manage the control and prevention of infection.
- Staff had received training in infection control and prevention and they had access to up to date procedures to support their role.

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.

- The service had a holistic approach to the assessment of people's needs and wishes. Where specific needs were identified the service sought advice from health professionals to ensure that people's needs were effectively met.
- People's needs were fully assessed and respected their personal choices and wishes. This information was clearly recorded.
- Assessments of need were completed and reflected expected outcomes for people and how they were to be achieved. People, family members and where appropriate healthcare professionals were fully involved in the assessment process and the development of care plans. Family members told us that they had several meetings with healthcare professionals and the service as part of their relative's moving into the service. They told us that this was done at a pace that suited their relative.

Staff skills, knowledge and experience

- Staff had the right knowledge, skills and approach to meet people's needs. New staff were inducted into their roles.
- Staff training was developed and delivered around people's specific needs. For example, when a person acted in a way that posed risk to themselves or others; staff had received training to enable them to support the person safely.
- * The registered provider had a training programme that staff at the service had access.
- Staff told us that training was informative and delivered in a way that was easy to understand. They told us that they enjoyed meeting staff from other locations whilst training.
- Staff received supervision and support from senior members of staff. Staff described the deputy and regional manager as approachable and supportive.
- * People told us that they liked the staff and one person told us, "[The] staff are good."

Offering people choice and support to eat and drink enough and maintain a balanced diet

- The service planned effectively to ensure that people's nutritional needs were met. Where required people were appropriately supported to maintain a balanced diet. The support they needed was clearly set out in their care plan.
- People told us they received the support they needed to eat and drink. Their comments included, "They make my tea and I help if I want to." Another person told us that staff supported them with a particular diet they were following.

Supporting people to live healthier lives, access healthcare services and support

- Staff supported people with their healthcare needs when it was required. arrangements for both transport

and staff to accompany people to appointments were undertaken if required.

- People told us that they could always speak to staff if they felt unwell and that staff would call a doctor.

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.

- We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. At the time of this inspection a number of people had restrictions in place that had been appropriately authorised and deemed to be in the person's best interests.
- Staff had completed MCA training and knew their responsibilities for ensuring consent to care and treatment was obtained in line with the law.
- Where a person was unable to verbally give consent, the service recorded physical gestures or movements that the individual displayed when consenting to care or support.
- When required, people's family members and people's representatives were involved in best interest decision making.
- Staff understood what depriving a person of their liberty meant. They also knew the importance of obtaining a person's consent before providing them any care and support. People told us that staff always asked for their permission prior to carrying out any personal care.

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

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 were treated well and felt supported by the staff team. Their comments included, "Nice staff", "Happy with staff" and "Yes, I'm happy." One family member explained that staff were caring towards their relative and knew how to communicate with them in a supportive way.
- Staff demonstrated a warm, caring approach to people and spoke fondly about and with knowledge of the people they supported.
- People and family members spoke positively of the staff and the service that was provided.
- Information within the service was available in different formats to meet people's needs. Staff understood the importance of providing information which was easily accessible to people.
- People were introduced to new members of staff prior to them delivering care and support.
- Staff had access to training and guidance in relation to equality and diversity. They had a clear understanding of delivering care and support specific to the person's needs.
- People confirmed that they received support from the same group of staff most of the time.

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

- Staff had good knowledge of people's diverse needs and their personalities, likes and dislikes and what was important to them.
- People were encouraged and supported to express their views about the service through direct contact with staff and the completion of surveys. Regular reviews of people's care gave them the opportunity to contribute to how their care and support was provided. In addition, people had access to the staff office to discuss anything they wished with the staff on duty.

Respecting and promoting people's privacy, dignity and independence

- The service involved and treated people with compassion, kindness, dignity and respect.
- People told us that staff respected their privacy. One person told us that when having a bath or shower, "They [Staff] put a towel around me, they respect my privacy."
- Records relating to people's care and support were stored securely at the office location and where only accessed by authorised staff. Staff understood their responsibilities in relation to keeping people's personal information confidential.

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 needs were clearly identified, including those needs that related to protected equality characteristics. For example, reasonable adjustments were made where appropriate; the service identified, recorded, shared and met information and communication needs of people living with a disability as required by the Accessible Information Standard. Staff knew people well and clearly understood people's needs and wishes as to how they communicated.
- People were provided with information in a format that they could access and understand.
- Staff understood and applied the principles of person-centred care and support. Family members told us that they regularly communicated with staff and were involved in care plan reviews.
- Staff were person-centred in their approach when speaking to and about the people supported.
- People were supported to maintain relationships that were important to them, access recreational and education opportunities within the local community.
- Staff engaged people in meaningful activities both within the service and around the local community.

Improving care quality in response to complaints or concerns

- A complaints procedure was in place and made accessible to all. We discussed with the management team how the procedure could be improved as the procedure in place did not fully describe other agencies that could be contacted to make a complaint about the service. The management team made a commitment to make improvements to the information available. A record was maintained detailing complaints, how they had been investigated and the outcome. Information relating to any complaints was monitored by the registered provider on a regular basis.
- People and family members knew how to make a complaint and they told us they would feel comfortable speaking with staff.

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 person-centred care.

The culture created promoted high quality, person-centred care. Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- The registered manager had resigned from their post shortly before this inspection took place. The registered provider was actively recruiting for a manager. In the interim, the area manager was working with the service to offer oversight and support to the staff team.
- The culture created a person centred approach to planning and delivering people's care and support. Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements
- A system for monitoring the quality and safety of the service was in place. People's care records were regularly reviewed by the staff team and information was provided to the registered provider on a regular basis. In addition, the area manager carried out regular audits within the service.
- People's care planning documents contained out of date information and duplication of records. This resulted in a large amount of information being stored that was not relevant and could deflect staff from the up to date information they needed access to. We discussed this with the senior staff team who demonstrated a commitment to ensuring the accurate information is easily accessible.
- Staff had a clear understanding of their role and responsibilities.
- Senior staff had understood their responsibilities under the regulatory requirements. They had notified CQC on all but one occasion when it was required of events and incidents which occurred at the service. Discussion took place regarding the need for CQC to be informed of all reportable incidents in a timely manner.
- People and family members were confident with staff employed within the service and told us they had regular contact with them.
- Policies and procedures to promote safe, effective care to people were available. These documents were regularly updated to ensure that staff had access to up to date best practice and guidance for them to carry out their role.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Staff engaged and involved people using the service and their family members. People told us that they were involved in planning activities and were supported by staff to furnish their homes.
- Staff were engaged and involved in the running of the service through regular team meetings.
- Positive relationships had been formed with external health and social care professionals. Staff sought advice and worked in partnership with others such as commissioners and social workers to ensure the best possible support for people.

Continuous learning and improving care.

- Staff received regular training and support for their role to ensure their practice was up to date and safe.
- Learning took place from accidents and incidents to minimise the risk of re-occurrence. Effective changes had taken place in the planning and delivery of people's care and support following incidents.