

Supported Living Solutions (North West) Limited

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Inspection report

Unit C, Elland Close
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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

Supported Living Solutions (North West) Limited is a small supported living service providing personal care and support to people in their own home. The service provided support to people with learning disabilities and / or autism. At the time of our inspection the service supported one person living in their own home. The office base is located on the outskirts of Westhoughton near Bolton.

At the time of our inspection one person was using the service. The service delivered 155 hours of care to this person each week. There were plans to expand the service to support other people in the future.

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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. 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's experience of using this service and what we found

Although the person supported had limited interaction with the inspector, the inspector was able to observe how they related to staff. The person was comfortable and interacted frequently, in a relaxed way with staff. The person's relatives told us they felt their family member was safe and looked after by staff. Staff were recruited safely and there were enough staff to meet the person's care and support needs. Staff assessed and managed risks to keep the person as safe as possible. They supported the person with any medicines needed.

Staff supported the person to see healthcare professionals promptly to help their health and wellbeing. They had sufficient nutrition and staff were familiar with their dietary needs. They were helped to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Staff assessed people's capacity to make decisions. Staff had been suitably trained and supported and had the skills, knowledge and experience to provide good care.

Staff provided care that met the person's different needs and preferences. They and their relatives were involved in planning their care and encouraged to make decisions. We saw the person enjoyed spending

time with the staff team who supported them 24 hours a day. The person's relatives told us their family member was treated with respect and consideration.

Staff had assessed the person's specific communication needs and were familiar with the ways they communicated. They were involved in a variety of activities of their choosing with staff support. Staff encouraged the person to indicate or their families to tell them about any concerns or complaints.

We saw the person could make their views known and make decisions about their lives. Staff listened to and acted on their wishes. The registered manager monitored the service to check on the quality and make sure staff were providing good care. They understood and acted on legal obligations, including conditions of CQC registration and those of other organisations. The registered manager worked in partnership with other services and organisations to make sure they followed good practice and people in their care were safe.

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

Rating at last inspection:

At the last inspection the service was rated good (published 23 August 2017).

Why we inspected

This was a planned inspection based on the rating at the last inspection.

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?

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.

Supported Living Solutions (North West) 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.

The inspection team

This inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in a 'supported living' setting, 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:

The inspection was announced. This was because the service is small and people are often out. We wanted to be sure there would be people available to speak with us.

What we did before inspection

We completed our planning tool and reviewed information we had received about the service since the last inspection. This included notifications we had received from the provider, about incidents that affected the

health, safety and welfare of the person supported by the service. We looked at previous inspection reports. We also sought feedback from partner agencies and health and social care professionals. We used the information the provider sent us in the 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 spent time with the person supported. We spoke with the person's relatives and directors, two members of staff and the registered manager.

To gather information, we looked at a variety of records. This included medicines records and the person's care records. We also looked at other information related to the management of the service. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements.

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; Assessing risk, safety monitoring and management

- People were protected from the risk of abuse and avoidable harm. The registered manager completed risk assessments to make sure they kept the person safe.
- Staff supported the person to be as independent as possible, while reducing unnecessary risks. The person's relatives were very involved in their family member's care and support. They said they felt the person was safe because they knew and trusted the staff.
- Staff were trained and fully aware of how to safeguard adults who may be vulnerable. The registered manager had arrangements to support people in emergency or unexpected situations.

Staffing and recruitment

- Staff recruitment remained robust and safe. The registered manager made recruitment checks before any new staff member could work with the person.
- There were sufficient, suitably skilled and experienced staff to meet the person's needs. Staff told us there were enough staff to help them support the person well.

Using medicines safely; Preventing and controlling infection

- Staff continued to manage medicines safely, as prescribed and in line with good practice guidance. Staff were all trained in managing medicines.
- The person supported, staff and visitors were protected from potential infection because staff were trained and followed safe infection control practices. Staff told us they had access to disposable gloves and aprons for personal care. This reduced the risk of cross infection.

Learning lessons when things go wrong

- Staff learnt from situations that did not go as well as planned. They reported and documented accidents, incidents and near misses. The registered manager reviewed these for lessons to be learnt, and took action where needed. This reduced the risks of similar incidents.
- The registered manager was aware of their responsibility to report any issues to the relevant external agencies and did so promptly.

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 the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- Staff continued to support the person with sufficient food and drink and advise on healthy options and any help they needed. This assisted them to receive effective and safe nutritional care and support.
- The staff team worked closely and effectively with health and social care professionals. They helped the person to receive health care promptly to improve their health and wellbeing.
- Staff helped other professionals provide the right treatment. They responded quickly to emergency situations so help was provided fast.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff support: induction, training, skills and experience

- Staff reviewed care plans with the person and their family to make sure information was up-to-date and changes made promptly.
- Many of the same staff had worked with the person over several years and knew them well. The person's family were also closely involved. This shared knowledge formed the basis of the person's care plan and assisted with maintaining continuity of care.
- Staff applied learning effectively in line with best practice. This helped them to provide care that met people's needs. The person's relatives were praising of the way staff supported their family member.
- Staff completed training in care to help develop their skills and knowledge. They also had staff meetings and frequent informal discussions and supervision. The person's family were confident staff were well trained and competent.

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.

- Staff understood their responsibilities under the principles of the MCA and ensured people's rights were protected. Applications and authorisations where a person had restrictions placed on their liberty were effectively monitored and managed.
- The person's consent was sought and obtained in line with the principles of the MCA. They had been asked for their consent to decisions where they were able to give this. Where they were unable to make a particular decision, relevant people were involved in best interests' decisions.

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

- Staff continued to be respectful of people's rights and differences. They were familiar with the person's individual and diverse needs which helped them provide the right support.
- The person's relatives told us staff were caring, capable and provided a very good standard of care for their family member. They told us their family member's health and wellbeing had improved in every way with the support from the staff team.

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

- Staff made sure they involved all relevant people in care planning and making decisions. The person indicated their choices and opinions about their lifestyle and activities. The person's relatives were involved in supporting their family member and shared their extensive knowledge of them with staff. Staff had developed the skills to 'read' the person's view of situations from expressions, gestures and reactions.
- Staff made sure people considering or already supported by them had information about advocacy services.
- Family and friends were encouraged and welcomed to visit. The person's extended family regularly visited them for family meals and get togethers.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful of the person's privacy and dignity. Staff told us the person enjoyed their own space at times and they supported this in a safe and respectful way. Staff assisted the person to be as independent as they could safely be. They assessed risks and reduced unnecessary difficulties to enable the person to have maximum autonomy.
- Care records were kept securely, and confidentiality respected.

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; 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 the person with person centred care that met the needs, respected their choices and enriched their life.
- Relatives told us the person enjoyed a varied and interesting lifestyle with frequent social and leisure activities of the person's choice. We met the person during one of their activities. It was clear they were engaging with the staff member and enjoying the activity. They told us they liked trampolining, car rides and burgers.
- The person had an informative care plan which instructed staff how to provide consistent care and support to the person. The registered manager discussed developing more easy read information as the service grew to engage people in their care.

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.

- Staff were aware of the AIS. They made sure the person was given information in a way they could understand.
- The staff team knew and understood the person's specific communication needs and documented these in their care plan.

Improving care quality in response to complaints or concerns

- The service had a complaints policy and procedure and complaints information was available. Although the person was not able to formally complain, they would make staff aware if they were unhappy with their care. The person's relatives were familiar with the complaint process. They told us they had not needed to make a complaint and any minor concerns were quickly dealt with to their satisfaction.

End of life care and support

- Staff understood the importance of supporting people and their families with high quality end of life care. The registered manager told us they had not needed to provide end of life care but would provide current

and future people supported with any care they needed

- The registered manager said they had documentation to explore people's preferences and choices in relation to end of life care where people were willing to do so.

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

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

- The registered manager continued to involve the person and family in their care and any changes in the service. They sought their views in informal discussion and formal reviews and encouraged them to indicate how they wanted to be supported. The registered manager explained how they would seek people's views as the service developed.
- Staff said they could talk with the directors or registered manager anytime and they listened and acted on suggestions. They said they were very supportive and helpful. Staff had meetings and frequent informal opportunities to share ideas and suggestions. There were few changes of staff and they remained a stable support and presence.

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

- The organisation was open and transparent. The staff team under the guidance of the registered manager and directors were clear their focus was the person supported and developing the service for others. Staff said the registered manager routinely worked closely with them and encouraged and motivated them to give the best possible care.
- The registered manager knew about their responsibilities to apologise to people and/or their relatives when mistakes were made and act on their duty of candour. They told us there had been no events that had required such a response.

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

- The registered manager was knowledgeable about the person's care needs and had supported them over a long period of time.
- The registered manager and directors worked effectively together and met frequently to discuss management plans. There was a clear staffing structure and lines of responsibility and accountability.
- The registered manager followed current and relevant legislation along with best practice guidelines. They understood legal obligations, including conditions of CQC registration and those of other organisations.

Continuous learning and improving care; Working in partnership with others

- The registered manager had systems to check people had good care and the person was supported as

they should be. They sought people's views, reviewed care and records and evaluated any accidents and incidents to see if lessons could be learnt.

- The registered manager looked at current legislation, standards and evidence-based guidance. Where improvements could be made these were discussed and acted on.
- The registered manager maintained good working relationships with partner agencies. This included working with commissioners and health and social care professionals. The person, supported by staff was involved in and part of their local community.