

Avens Ltd

ASLN

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

ASLN is a domiciliary care and supported living service. The service provides care and support to people living in their own homes and flats in the community and 'supported living' settings, so they can live in their own home as independently as possible.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of our inspection, the service was supporting 26 people with personal care.

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 had a positive ethos and an open culture. The registered manager was approachable, understood the needs of people, and listened to staff. Systems to monitor the quality of the service were in place, they were used to develop the service and drive improvement.

People's safety was promoted by staff who followed guidance on how to reduce potential risk. People were protected from the risk of harm and received their prescribed medicines safely. People were supported by sufficient numbers of staff who were safely recruited.

People's needs, and expectations of care were assessed, which included assessing people's choices and needs based on their cultural diversity.

People were supported to have maximum choice and control of their life 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 were supported by staff who had the necessary skills and knowledge. Staff were supported through ongoing training and supervision to enable them to provide good quality care. Staff promoted people's health by liaising with health care professionals when required.

People spoke positively about the support they received and told us staff were caring and kind. Staff treated people with respect and maintained their dignity.

People and family members were involved in the development of care plans, which enabled staff to provide the care and support each person had agreed was appropriate to them.

Information was provided to people in an accessible format to enable them to make decisions about their care and support. People knew how to raise a concern or make a complaint, and the provider had implemented effective systems to manage any complaints received.

The management team were aware of their role and responsibilities in meeting their legal obligations. The provider worked with key stakeholders to facilitate good quality care for people.

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

The last rating for this service was good (published 4 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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.

ASLN

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

The inspection was carried out by one inspector.

This service is a domiciliary care agency and supported living provider. It provides personal care to people living in their own houses and flats. It also 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 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 31 October 2019 and ended on 4 November 2019. We visited the office location on 31 October and 4 November 2019 and visited people at home on the 4 November.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We contacted Healthwatch and health and social care commissioners. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. Health and social care commissioners commission care from the provider and monitor the care

and support that people receive. We used all this information to plan our inspection.

During the inspection

We spoke with seven people who receive support from the service and two people's relatives. We also spoke with six members of staff, including support workers, heads of support, the deputy manager and registered manager.

We looked at various records, including care records for four people. We also examined records in relation to the management of the service such as quality assurance checks, staff training and supervision records, safeguarding information and information about complaints management.

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

- People told us they felt safe with the staff who provided their care and trusted staff to support them in a safe way. One person said, "Yes, I feel safe, I trust the staff."
- Staff had been trained in safeguarding procedures, and they knew what action to take to protect people from harm and abuse. One member of staff said, "I would contact the local authority, CQC or the police."

Assessing risk, safety monitoring and management

- People's safety was assessed, monitored and promoted.
- Risks associated with people's care, support and environment had been assessed, and records provided guidance for staff on the measures needed to reduce potential risk. For example, information as to how to support people to manage their anxieties and behaviour.
- People had been supported to access any equipment they needed to enhance their independence and safety, and staff knew how to support people to use this appropriately. For example, where people needed equipment to support their mobility.

Staffing and recruitment

- People were safeguarded against the risk of being cared for by unsuitable staff because there were appropriate recruitment practices in place.
- Staff had been checked for any criminal convictions and satisfactory employment references had been obtained before they started to work at the service.
- People told us the service was reliable and they usually knew which staff would be supporting them in advance as they were given a rota. One person said, "I always get staff I know."

Using medicines safely

- Staff who had undertaken training in medicine management supported people to take their medicines, and applied creams that had been prescribed, where required.
- Staff completed people's Medication Administration Records, to confirm people had taken their medicine.
- Regular audits were carried out to ensure correct procedures were followed by staff and to promptly identify any action required.

Preventing and controlling infection

- People's safety was promoted through the prevention and control of infection. The provider ensured personal protective equipment (PPE), such as disposable aprons and gloves were available, and used by

staff when supporting people with personal care.

- Staff received training in infection control.

Learning lessons when things go wrong

- Systems were in place to ensure staff were informed of changes required to their practice when a need for improvement was identified.
- Staff knew how to report accidents and incidents. The management team reviewed these to identify themes, trends, learning and actions required to reduce risk to people.

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.

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

- People's needs were assessed to ensure people received good outcomes. The management team met with people to undertake an assessment, following initial information provided by commissioners.
- The assessment process took into account people's physical and mental well-being, level of independence, their preferences, social circumstances, communication needs and dietary requirements.
- People and their relatives where appropriate confirmed they were involved in the assessment process. One person's relative told us, "We were involved at the beginning putting the support plan together with [the management team] and it is reviewed."

Staff support: induction, training, skills and experience

- People were supported by staff who had the skills, knowledge and experience to meet their needs. This included the ability of staff to meet people's emotional and physical care needs.
- Staff received training in key areas during their induction and on an ongoing basis. This included staff new to care being provided with training for the Care Certificate. This is a set of nationally recognised standards which support good practice and values within care and support services.
- Staff were supported through regular supervision and provided with an opportunity to discuss their training and development.

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

- People's dietary needs were assessed and detailed within their care plans.
- Staff provided people with meals, snacks and drinks which took into account their dietary needs based on their health needs, culture, religion and preferences.

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.

- Staff were aware of their responsibility to ensure people consented to care being provided. Staff described how they encouraged people to make day to day decisions regarding their care.
- People's capacity to make informed decisions about their care had been undertaken where required. Where people did not have the capacity to make an informed decision, best interest decisions had been made with the involvement of people's representatives.

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

- Staff followed people's risk assessments and support plans. These provided guidance as to the support people required to maintain and promote their health, and made specific reference to known health care conditions.
- Staff supported people to attend health care appointments to ensure their health care was maintained and promoted.
- Staff worked in a timely and effective way with other organisations involved in people's care, which included people's care commissioners, doctors and specialist nurses.

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 were well cared for. The feedback we received from people was positive about the support they received. One person said, "I love being here with staff." Another person's relative said, "They [staff] support [person's name] with patience, love and care."
- The management team and staff had built positive relationships with people and their families and treated them with compassion. One person's relative said, "[Person's name] feels loved, they see the staff as friends."
- People were supported by a regular team of staff which ensured consistent care. One person said, "I know all my staff and I get the help I need."

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

- People and relatives said they were involved in the planning of their care. One person said, "If I want anything changing, it is changed."
- The registered manager and staff understood the importance of involving people in decision making. One person's relative supported them with planning their care and told us, "[Registered manager] comes over for [person's name's] reviews, we're all on the same page, the review is done together, and everything is discussed."
- The management team had a good knowledge of advocacy and had supported people to access advocacy services when they needed to.

Respecting and promoting people's privacy, dignity and independence

- People's privacy was respected, and their dignity maintained. One person said, "I like to go up to my room at night and staff always knock and wait for me to answer before they come in." Another person said, "The staff respect our home."
- People told us they were encouraged to do what they could for themselves to maintain their independence. One person described how staff had supported them to be more independent in monitoring a long-term health condition.
- Care records were kept securely, and confidentiality maintained.

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

- People received care that was personalised to them. All the people and relatives we spoke with said that staff knew them well, understood their needs and preferences, and were flexible in their approach to supporting them. One relative said, "They [staff] give [person's name] all the help and support they need."
- There were several examples of care and support where staff had helped people improve their health, wellbeing, independence and skills. Management and staff were focussed on providing person centred support for people to help improve their lives and general wellbeing wherever possible.
- People's care and support plans were outcome focused and personalised. Care plans were reviewed with the person and their relative if appropriate and updated to meet people's changing needs.

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

- People were supported to engage in social activities.
- People provided many examples of staff supporting them to access the activities they enjoyed, including; voluntary work opportunities, support to access amenities in the local community and regular holidays.

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 communication needs were understood and met. Assessments of people's needs and care plans detailed people's communication needs, and provided guidance for staff on how to communicate with people effectively. For example, where people used signs and symbols to communicate.

Improving care quality in response to complaints or concerns

- A complaints policy and procedure was in place.
- Concerns and complaints were documented and investigated, and people told us they were confident in raising concerns. One person said, "If I wasn't happy I would go to the managers, If I wanted to see them I could ask them to come to the house and they would."

End of life care and support

- At the time of inspection, no end of life care was being delivered. The registered manager was aware of what was required to support people who may need to receive end of life care.

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 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.

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

- Feedback from people, their relatives and staff confirmed that people were happy with the service they received. We received consistent feedback that the service was providing personalised care to people. One person's relative said, "The service is absolutely wonderful. The staff are so engaged, they sit with [person's name] and sort out all their worries."
- People and their relatives told us the service was well run and managed. People told us they knew the management staff well and felt confident in their abilities to manage their care and support effectively.
- All staff provided positive feedback about their experiences working at the service and the support that was provided to them. One member of staff said, "The managers are supportive and communication between support staff and the office is good."

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 registered manager was aware of the requirements under the duty of candour. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment.
- Staff knew how to 'whistle-blow' and knew how to raise concerns with the local authority and the Care Quality Commission (CQC) if they felt they were not being listened to or their concerns acted upon.

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

- Staff and management were clear about their roles and understood what was required of them.
- The registered manager notified the CQC and other agencies of any incidents which took place that affected people who used the service.
- The provider had displayed the rating from the previous inspection of the service, as legally required.

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

- People's views were regularly sought about the quality of the service. An annual survey was sent to people, family, friends and advocates. The most recent survey of January 2019 showed the majority of responses to questions were positive.
- Staff meetings were held to engage with staff about current issues and update them about people's care.

Staff told us they felt kept up to date and able to contribute to the running of the service.

Continuous learning and improving care

- The provider and registered manager regularly checked areas within the service for quality and were focussed on continuous improvement.
- A review of the support provided to people to manage their anxieties and behaviour had resulted in a change to staff training and focus in this area. As a result, there had been a reduction in the number of incidents of behaviours caused by unalleviated stress and anxiety.

Working in partnership with others

- The provider worked with key statutory organisations, which included the local authority, safeguarding teams, and clinical commissioning groups. This was to facilitate the support and care of those using the service.
- The management team and staff worked closely with specialist health and social care professionals to ensure people's health needs were met. This included making referrals to the appropriate professionals when people's needs changed.