

Sorelle Support Limited

Sorelle Support

Inspection report

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Date of inspection visit:
06 March 2018

Date of publication:
29 March 2018

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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

This was a comprehensive inspection which took place on 6 March 2018 and was announced. We gave the registered manager 48 hours' notice because the location provides a domiciliary care service and we needed to make sure someone would be in the office to assist us.

Sorelle Support Limited is a domiciliary care agency. It provides personal care to people living in their own houses and flats. It provides a service to older adults, younger adults, people living with dementia and people with learning disabilities or autistic spectrum disorder. Not everyone using Sorelle Support receives the regulated activity. The Care Quality Commission (CQC) only inspects the service being received by people provided with 'personal care', which is help with tasks related to personal hygiene and eating. Where they do receive the regulated activity 'personal care', we also take into account any wider social care provided. At the time of the inspection the service was providing personal care and support to five people.

The service had a registered manager as required. A registered manager is a person who has registered with CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the service is run. The registered manager was present and assisted us during the inspection.

At the last inspection the service was rated Good in all domains. At this inspection we found the service remained Good in all domains.

People received support that was safe. Staff were trained to safeguard and protect people. They reported concerns promptly and when necessary and the registered manager took appropriate action. People supported with medicines received them safely and when they were required. Risks to people were assessed and actions taken to minimise risks without restricting their freedom. A robust recruitment procedure was followed to ensure as far as possible only suitable staff were employed. Appropriate personal protective equipment was supplied and used to prevent the spread of infection.

People continued to receive effective support from staff who were well trained and had the necessary skills to fulfil their role. Staff were very well supported by the registered manager and the management team. Regular one to one meetings and appraisals provided time to seek advice, discuss and review their work. They had opportunities to develop their skills and knowledge as well as gain relevant qualifications. People were supported with maintaining a balanced diet and adequate hydration when this was part of their support plan. People's healthcare needs were monitored and advice was sought from healthcare professionals when necessary. People were supported 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.

The service remained caring. Staff were kind and patient and people had formed trusting relationships with

them. People's privacy and dignity were protected, they and their relatives told us staff treated them with respect. People and when appropriate relatives were fully involved in making decisions about their support. Staff encouraged people to maintain and increase their independence.

The service remained responsive to people's individual needs. Staff knew people very well and paid particular attention to finding out about their interests and personal preferences. This enabled support to be focused to achieve people's desired outcomes. Individual support plans were person-centred, they considered the diverse needs of each person, taking into account any protected characteristics. The service provided flexible support embracing people's individual wishes. People knew how to raise concerns or make a complaint, they felt confident they would be listened to if concerns were raised. The service was working to the accessible information standard.

The service was well-led, with strong leadership from the registered manager and the management team. Records were relevant, complete and reviewed regularly to reflect current information. The registered manager promoted an open, empowering, person centred culture. The values of the service were embedded in the way staff worked with people. Feedback was sought and used to monitor the quality of the service. Audits were conducted and used to make improvements.

Further information is in the detailed findings below.

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 remains Good

Is the service effective?

Good ●

The service remains Good

Is the service caring?

Good ●

The service remains Good

Is the service responsive?

Good ●

The service remains Good

Is the service well-led?

Good ●

The service remains Good

Sorelle Support

Detailed findings

Background to this 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 was planned to check 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.

This was a comprehensive inspection which took place on 6 March 2018, it was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service, we therefore needed to be sure that someone would be available in the office to assist with the inspection.

The inspection was carried out by one inspector. During the inspection we spent time at the services' office and visited two people in their own homes with their agreement.

Before the inspection we reviewed the information we held about the service which included previous inspection reports and notifications. A notification is information about important events which the service is required to tell us about by law. We contacted the local authority safeguarding team who had no concerns with the service. We also requested feedback from commissioners and a community professional, however, we did not receive any feedback from them.

We reviewed the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we spoke with two people who use the service and one relative of a person who uses the service. We received feedback from another relative following the inspection. We spoke with four members of staff including the registered manager, the support co-ordinator and two support staff. A further five staff members provided written feedback. We looked at records relating to the management of the service including five people's support plans and associated records. We checked records related to managing medicines and reviewed five staff files including the recruitment records for the most recently recruited staff. We also reviewed staff training records, the compliments/complaints log and accident/incident records.

Is the service safe?

Our findings

People felt safe with the staff from Sorelle Support. When asked if they felt safe with the support workers who visited them one person said, "Yes, they're lovely." Relatives were equally confident that their family members were safe. One told us they believed the service took measures to make sure their family member was safe in their living environment. They said concerns were always addressed and they felt their family member was protected from abuse.

Staff were trained in protecting people from abuse. They knew their responsibilities with regard to reporting concerns to safeguard the people they supported and when necessary had done so. The registered manager had appropriately reported concerns to relevant authorities to protect people using the service. The support team took time with people to advise and assist them to find ways to remain safe and involved other agencies to support people when necessary. Staff were aware of the provider's whistleblowing policy. They stated they would not hesitate to use this if necessary. One commented, "Yes definitely I would use it. The implications are so big, it's people's lives."

Risks relating to people and the support they required were assessed. They included health, financial and nutritional risks. Plans to manage and mitigate risks were in place and reviewed regularly. People's support plans contained guidance for staff to help minimise risk without restricting people or their independence. People's home environment was assessed to identify safety risks to both people using the service and the staff visiting them. Staff told us they always had up to date information. They said that communication between the team was effective and ensured they were always aware of any changes.

Safe and robust recruitment procedures were followed when new staff were employed. The required checks and information had been sought before new staff commenced working for the service. The registered manager valued the views of people regarding the staff who worked with them and had begun involving people in the recruitment of staff. The number of staff required was determined by the needs of the people using the service.

People received their medicines safely and at the time they required them. Staff had been trained in the safe management of medicines. Their competency was checked by senior staff who had been specifically trained in making competency observations. Medicine records were completed and audited for any errors. Staff confirmed they were provided with and used personal protective equipment to prevent the spread of infection.

There was a system for recording accidents and incidents. The registered manager told us there had been only one accident since the previous inspection involving a member of staff. This had been investigated and the necessary action taken to avoid recurrence. They confirmed any accident or incident was reviewed so that lessons could be learnt and shared with the team. Staff were aware of actions to take in an emergency and the provider had a contingency plan to assist staff in dealing with situations such as staff sickness or poor weather conditions.

Is the service effective?

Our findings

People's needs were assessed thoroughly before a service was offered. The information obtained during assessment included personal likes and preferences, social interests, cultural and spiritual wishes as well as physical and emotional needs. People and when appropriate their family and other professionals were involved in the assessment. The registered manager told us this enabled them to establish people's desired outcomes and plan relevant and achievable goals with people. This information was captured in support plans which were wholly focused on the individual. The guidance and information available in the support plans was sufficiently detailed to help ensure staff provided effective support for people in the way they preferred. Staff had received training in equality and diversity and there were examples of them respecting and supporting people with protected characteristics.

People benefitted from a staff team who were supported in their job role. Regular one to one meetings were held between staff and their line manager. Staff told us, "There is always an open door. There's no need to wait for a supervision session, they are so approachable you can come anytime." Annual appraisals provided staff with the opportunity to reflect on their work and discuss their development needs. One staff member commented, "It's really nice to get feedback on your work." They went on to tell us how they had been encouraged and supported to gain qualifications and make progress in their career. Staff were observed while working with people on a regular basis. One commented, "It happens quite often." They added that they received feedback following these observations which they found useful.

New staff were provided with induction to the service and training which followed the care certificate standards. All staff were offered the opportunity to gain a nationally recognised qualification in health and social care. Those who had been with the service for a length of time had completed both level two and three qualifications while newer staff were working toward them. Two of the more senior staff were undertaking a level five qualification in preparation for taking managerial positions in the service. Refresher training was provided annually and varied from face to face and practical training to eLearning.

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. Staff had received mental capacity training and understood their responsibilities. When necessary best interests meetings were held with people, professionals and others who knew people well. Examples included managing finances and medical treatment.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The registered manager was aware that any applications to deprive a person of their liberty would need to be made to the court of protection via the person's funding authority. No applications had been necessary at the time of the inspection.

Staff provided support with eating and drinking if this was part of the planned support. The registered manager and the staff team were committed to supporting people with healthy nutrition and spent time with people discussing menus. They were aware of the type of foods people preferred and helped them meet their diverse needs in relation to diet. Where there were concerns regarding people's nutritional intake, this was monitored and if necessary advice sought. A relative told us, "The Sorelle support seems to have the skills to treat [name] with respect and understanding when faced with difficult situations that [name] finds hard to understand will benefit her. One such situation was a weight increase. They said staff had provided additional support to overcome these challenges so their family member happily accepted the solutions but still felt in control of their independence.

People were supported with their health and well-being needs. People were assisted to make and attend medical appointments when necessary. Health professionals were contacted for advice when required.

Is the service caring?

Our findings

People and their relatives commented on the supportive and caring relationships they had developed with all the staff at Sorelle Support. For example, "I was worried about [family member] starting with a new agency, but Sorelle made it so straightforward for him in the changeover, after 3 years with his previous agency. The support workers are always prompt and happy when they arrive to take [name] out. He enjoys his support days doing different activities. I would thoroughly recommend them to anyone."

People were valued and treated with kindness, dignity and respect. The staff team were dedicated and committed to providing support that was person-centred and promoted people's independence as far as possible. They were motivated by the registered manager to deliver support that was sensitive, compassionate and empowering. A relative told us their family member was, "Always respected." Another commented, "They seem to have a great deal of respect and understanding of [name]." People were fully involved in making decisions about the support they received.

People, their relatives and staff spoke about how they were able to be comfortable in each other's company. We observed the welcome received by staff visiting people was warm and inviting, making it clear that people were pleased to see them. It was evident that people and staff knew each other well, conversations were relaxed and people clearly felt at ease with the staff present. People's needs and preferences were known well by the staff supporting them. This was demonstrated when they told us about people's interests and the support they provided to assist people in attaining their goals.

The registered manager believed strongly that continuity of support staff was key to providing the best possible service to people. They told us, "Continuity of staff is the only way to succeed." They also considered it essential to be positive when supporting people. They said, "People thrive on positivity, not negativity." Staff confirmed this approach was promoted throughout the service. A matching process was used to help ensure staff were compatible with the people they supported. One member of staff commented on this process and told us it did not always work straight away, but once they got to know people they could match people more effectively. This had helped to foster trusting relationships.

People were shown respect and said their privacy and dignity were protected. Staff provided examples of how they protected people's privacy and dignity both in their own homes and when supporting them in the community. For example, one staff member told us how they encouraged the person they supported to be aware of their own dignity when using the swimming pool changing facilities. Staff were committed to supporting people to be as independent as possible. They spent time with people developing goals to increase people's independence while actively supporting them where necessary. A relative commented, "They are cognisant of balancing the need for [name] to feel in control of her independence and providing the extra help so that it can be achieved."

People's personal information was stored securely in the service's office in order to maintain confidentiality. Computer records were password protected and people's records kept in their own homes were stored in accordance to their individual wishes.

Is the service responsive?

Our findings

The service provided flexible support to people. They had received a number of compliments related to the flexibility they provided, such as, "The Sorelle support workers who have supported [name] are friendly, supportive, flexible and very understanding " and "Sorelle Support are very flexible in the service they offer." Examples of the flexibility offered included, support visits being timed or rearranged to suit activities people wished to attend or appointments they needed to keep. The registered manager told us the service was run to "always put people first". People and their relatives confirmed this was the case.

The registered manager and staff team were aware of the risk of social isolation for some of the people they supported. They worked to seek as many opportunities as possible for people to be able to have social opportunities. For example, they ran an allotment where groups of people who use the service met and enjoyed horticultural activities together. They also supported people to attend social groups, college courses and a variety of activities such as choirs and drama groups. They constantly sought fresh ideas and discussed these with the people they supported. Events to bring people, relatives and staff together were also organised. Photographs of these events demonstrated the enjoyment that had been experienced by all who had taken part. On an individual level, activities of a personal interest were also supported. For example, a day had been organised for one person to spend a day with people in a job they were particularly interested in.

People's support plans were reviewed frequently and people were encouraged to contribute to planning their own support with the help of relatives and professionals as appropriate. This helped to ensure information was up to date and people's most current needs and preferences were reflected. Support plans were person centred providing detailed guidance for staff.

The registered manager was aware of the Accessible Information Standard (AIS). AIS is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information. A variety of communication methods were used to help ensure people understood information and they were able to express their needs and views. For example, communication passports and visual aids assisted those with difficulty in using verbal language to make their wishes known. In one person's home we saw photographs of staff were on a timetable to show who would be supporting them on which day. Pictures of different activities helped the person know when they would be doing certain things such as household chores and taking a shower. The registered manager was in the process of reviewing how other information could be made more accessible to people. They had begun designing a new survey questionnaire using emojis to capture the views of people who preferred pictorial communication. They told us the complaints policy was also going to be produced in a more accessible format in the future.

The registered manager and the support team worked closely with health and social care professionals in the interests of the people they supported. This included GPs, OTs and social workers. We saw a professional had commented on how well support was progressing for one person and complimented the service on their work.

People and their relatives were encouraged to give their views and feedback on the service. They knew how to make a complaint if necessary and were confident concerns would be dealt with effectively if raised. We reviewed the complaints log and found where a complaint had been raised it had been dealt with in accordance with the provider's policy and resolved to the satisfaction of the complainant.

Is the service well-led?

Our findings

The registered manager was extremely knowledgeable about the people the service provided support to, their families and the staff they employed. They told us they valued the relationships that had been built and felt this was how they had achieved positive outcomes for the people. The registered manager was enthusiastic and committed to providing support for each person that reflected their individual and diverse needs. They sought a variety of resources and experiences for the people they supported and encouraged the staff team to do the same. Examples included, people spending time with the local fire brigade finding out about the role of the fire-fighter, working on the allotment and forming a cheerleading group. Staff were eager to make suggestions and said their views and opinions were always listened to and valued.

There was an open and empowering culture in the service that was person-centred. This was embedded into the values shown by the staff team. One member of staff quoted the service's value of "Your life. Your choice" and told us this was what they focused on each day when they worked with people. Staff made it clear that this culture stemmed from the two directors of the service. One of the directors was the registered manager while the other supported them in the management of the service. Staff spoke highly of the support received from the management team and their commitment to doing the best they could at all times. For example, one told us, "Since working at Sorelle I have received more recognition, praise and support than I have ever received in my previous jobs. The management are very understanding and supportive and always want the best for our service users. They take real dedication in the running of the company."

The management team sought up to date information on best practice via membership of appropriate organisations and associations as well as using relevant internet resources. They were keen to develop relationships with professionals and worked closely with other teams to gain positive outcomes for the people they supported.

Staff spoke with pride about Sorelle Support and told us it was a good company to work for. One staff member said "I am very proud to work for Sorelle support and will do, for many years to come. I thoroughly enjoy working with each and every one of our service users and team." Another told us, "It's a great company and they believe if it's not good enough for our loved ones it's not good enough for the people we support." Staff told us the registered manager worked flexibly with them to accommodate their needs and confirmed the whole team worked together to support each other. A staff recognition scheme rewarded staff who had shown dedication and willingness to go over and above their duties.

The registered manager understood when they needed to notify the Care Quality Commission of significant events. Notifications had been sent in a timely manner when required. The quality of the service was monitored and audits identified shortfalls or areas for development. Examples of audits included those carried out on support files, recruitment records, individual staff supervision and direct observation of practice. Areas of concern were addressed in order to improve the service and action was taken promptly to discuss any issues relating to practice. People's opinions were sought, analysed and acted upon. A recent quality survey illustrated people were satisfied and pleased with the service they received.

Formal staff meetings were not held frequently as other opportunities for the team to gather were in place. These often included people supported by the service. Staff confirmed the methods of communication were very good. They told us they were able to speak with the management team at any time for advice and received a weekly newsletter to update them on what was happening in the service.