

Normanshire Care Services Ltd

# Normanshire - Supported Living Services Ltd

## Inspection report

2b  
New Road  
London  
E4 8ET

Date of inspection visit:  
29 August 2019

Date of publication:  
24 October 2019

### Ratings

Overall rating for this service	Inadequate ●
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Is the service safe?	Inadequate ●
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Is the service well-led?	Inadequate ●
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# Summary of findings

## Overall summary

### About the service

Normanshire – Supported Living Services Ltd provides personal care and support in five settings to people with learning disabilities and autism who may have behaviour that challenges services.

### People's experience of using this service

We were unable to fully inspect the service because there was no information kept at their registered address. Concerns had been raised about staffing levels and we were able to check records about numbers of staff on duty from rotas sent to us following our visit. Records showed people were not being supported by competent staff due to staff working excessive hours without a reasonable rest break or being rostered to work at more than one setting at the same time.

The provider had moved address and was operating from an address that was not registered with the Care Quality Commission. The provider had not picked up on the issue of staff being rostered on at more than one location at the same time or on the issue of staff working excessive hours.

We found two breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in relation to staffing and good governance. We found one breach of the Care Quality Commission (Registration) Regulations 2009 in relation to the provider's registration.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 21/12/2018).

### Why we inspected

We received concerns in relation to the management of medicines and staffing. As a result we undertook a focussed inspection to review the Key Questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them. Ratings from the previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

The overall rating for the service has changed from good to inadequate. This is based on the findings at this inspection. You can see what action we have asked the provider to take at the end of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Normanshire Supported Living Services Ltd on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Enforcement

We have identified breaches in relation to the provider's registration, staffing and good governance at this inspection.

Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

### Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

### Special Measures

The overall rating for this service is 'Inadequate' and the service is therefore in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe. And there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

**Inadequate** ●

The service was not safe.

Details are in our Safe findings below.

### Is the service well-led?

**Inadequate** ●

The service was not well-led.

Details are in our Well-Led findings below.

# Normanshire - Supported Living Services Ltd

## **Detailed findings**

### Background to this inspection

#### The inspection

We planned to carry 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.

#### Inspection team

Two inspectors were planned to undertake this inspection.

#### Service and service type

Normanshire – Supported Living Services Ltd provides care and support to people living in five '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

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the

judgements in this report. We sought feedback from the local authority. We used all of this information to plan our inspection

#### During the inspection

When we arrived at the inspection, the registered manager told us that there were no records currently kept at the address because these had been relocated. We asked the registered manager to send us a copy of the staff rota for each of the supported living services. However, we were unable to continue with this inspection as there were no records for us to view.

#### After the inspection

The registered manager sent us a copy of the staff rota for each supported living setting as requested.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At this last inspection this key question was rated good. At this inspection, this key question has now deteriorated to inadequate. This meant people were not safe and were at risk of avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- We were unable to check this question because the service was not operating from the registered address.

Assessing risk, safety monitoring and management

- We were unable to check this question because the service was not operating from the registered address.

Staffing and recruitment

- We were unable to check recruitment because the service was not operating from the registered address.
- We asked the registered manager where staff and peoples records were being kept. They were unable to provide us with either a clear answer or access to any of these records.
- We checked the rotas for staffing numbers which the registered manager sent us following the visit. We noted some staff were either working excessive hours without a reasonable break or were rostered to work the same hours in more than one supported living setting.
- The registered manager was also on the rota to work at more than one registered service. This meant people were at risk of being supported by staff who were too tired to support them safely or were at risk of not being supported at all.

This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Using medicines safely

- We were unable to check this question because the service was not operating from the registered address.

Preventing and controlling infection

- We were unable to check this question because the service was not operating from the registered address.

Learning lessons when things go wrong

- We were unable to check this question because the service was not operating from the registered address.

# 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 this last inspection this key question was rated good. At this inspection, this key question has now deteriorated to inadequate. This meant there were widespread and significant shortfalls in service leadership. Leaders and the culture they created did not assure the delivery of high-quality care. Some regulations were not met.

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 understood their responsibilities under the duty of candour.
- However, the service had moved address and all associated records before receiving authorisation from the Care Quality Commission (CQC).

This was a breach of Regulation 15 of the Care Quality Commission (Registration) Regulations 2009.

- Following the visit, the provider submitted an application to CQC to change the address they are operating from. This application is now being processed.

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

- We were unable to check most of this question because the service was not operating from the registered address.
- However, the provider and registered manager had not identified the issues with the rota and the risks this presented for people in being supported by staff working excessive hours or being expected to work in more than one setting at the same time.

This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014,

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

- We were unable to check this question because the service was not operating from the registered address.

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

- We were unable to check this question because the service was not operating from the registered address.

Continuous learning and improving care

- We were unable to check this question because the service was not operating from the registered address.

Working in partnership with others

- We were unable to check this question because the service was not operating from the registered address.

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	<p>Regulation 15 Registration Regulations 2009 Notifications – notices of change</p> <p>The service had moved address and all associated records before receiving authorisation from the Care Quality Commission (CQC).</p>
Regulated activity	Regulation
Personal care	<p>Regulation 17 HSCA RA Regulations 2014 Good governance</p> <p>The provider was operating a service out of an unregistered location. There were a lack of robust auditing systems to ensure the quality of the service.</p>
Regulated activity	Regulation
Personal care	<p>Regulation 18 HSCA RA Regulations 2014 Staffing</p> <p>The registered person failed to ensure staff were appropriately deployed. This put people at risk of harm.</p>