

# **United Response**

# United Response, Shared Lives

## **Inspection report**

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### Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

# Summary of findings

### Overall summary

About the service

United Response, Shared Lives is a shared lives scheme which provides people with long-term placements within shared lives carers own homes. At the time of our inspection there were 19 people using the service.

People's experience of using this service and what we found

People told us they felt safe living with their shared lives carer and that they were well treated. Managers and shared lives carers understood their responsibilities for keeping people safe from the risk of abuse and they were confident about reporting any concerns about people's safety.

People received care and support in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Risks to people were assessed and managed in a way that promoted people's independence. Shared lives carers completed training in topics of health and safety, and they were confident in dealing with emergency situations.

Safe recruitment procedures were followed. The fitness and suitability of office-based staff and shared lives carers was thoroughly assessed before they were recruited to support people using the service, and they received the training they needed for their role. People were matched with a shared lives carer who could best meet their needs.

Safe infection prevention and control (IPC) measures were followed to minimise the risk of the spread of infection, including those related to COVID-19.

Medicines were managed safely. Shared lives carers were suitably trained to manage people's medicines and their competency was regularly checked.

The culture of the service was person-centred and inclusive. People and shared lives carers spoke positively about the way the service was managed describing the manager as approachable and very supportive.

There were effective systems to monitor the quality and safety of the service which included obtaining the views of people and others. There was good partnership working with others to make sure people received all the care and support they needed.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

• The shared lives model of care maximised people's choice, control and independence.

Right care:

- People received care which was person-centred and promoted people's dignity, privacy and human rights. Right culture:
- The ethos, values, attitudes and behaviours of United Response shared lives management team and shared lives carers helped ensure people lead confident, inclusive and empowered lives.

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

Rating at last inspection and update

The last rating for this service was good (published 22 February 2018).

#### Why we inspected

We undertook this inspection as part of a random selection of services which have had a recent Direct Monitoring Approach (DMA) assessment where no further action was needed to seek assurance about this decision and to identify learning about the DMA process.

We undertook a focused inspection to only review the key questions of Safe and Well-led. Our report is only based on the findings in those areas reviewed at this inspection. The ratings from the previous comprehensive inspection for the Effective, Caring and Responsive key questions were not looked at on this occasion. Ratings from the previous comprehensive inspection for those key questions were used in calculating the overall rating at this inspection.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has stayed the same based on the finding from this inspection.

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

# 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 well-led?	Good •
Is the service well-led? The service was well-led.	Good



# United Response, Shared Lives

**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 Health and Social Care Act 2008.

#### Inspection team

This inspection was completed by one inspector.

#### Service and service type

United Response, Shared Lives is a shared lives scheme which provides people with long-term placements, short breaks and respite care, within shared lives carers (SLC) own homes.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was no registered manager in post. A manager was in post and they had applied to the Care Quality Commission to become the registered manager.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we wanted to be sure the manager would be available to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

During our visit to the office we spoke with the manager and area manager. We viewed records relating to four people using the service and records relating to the recruitment of staff and shared lives carers. We also viewed a variety of records relating to the management of the service, including policies and procedures.

Following our visit to the office we spoke over the telephone with people who were living in a shared lives placement and six shared lives carers.



## Is the service safe?

## Our findings

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

At our last inspection we rated this key question was good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people were assessed, monitored and safely managed.
- Risk assessments were completed to determine the level of risk people faced and the measures needed to reduce the risk of harm to them and others. Positive risk taking was considered to enable people to take risks as part of an independent lifestyle.
- Checks were carried out on the homes of shared lives carers to make sure their accommodation was safe and suitable for people to live.
- Shared lives carers were knowledgeable about the risks people they supported faced and how to support people safely. Risks to people were kept under review and their care and support plans were updated to reflect any changes to their care and support needs.
- Shared lives carers completed training in topics of health and safety including dealing with emergencies. They were provided with details of who they needed to contact for support in the event of an emergency.

Systems and processes to safeguard people from the risk of abuse

- There were processes and systems to protect people from the risk of abuse.
- Shared lives carers had completed safeguarding training and were knowledgeable about the different types and indicators of abuse. They told us they would not hesitate to report any safeguarding concerns to the manager of the service or directly to the local authority safeguarding team.
- The manager understood their responsibilities for safeguarding people from the risk of abuse. They knew which agencies they were required to notify in the event of an allegation of abuse.
- People told us they felt safe living with their shared lives carer and were treated well. They said they knew who to tell if they had any concerns about their safety.

#### Staffing and recruitment

- Staffing and recruitment processes were safe.
- People were matched with a shared lives carer who could best meet their needs.
- A range of pre-employment checks were carried out on staff and shared lives carers to check their fitness and suitability for the role. Checks included a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National computer. The information helps employers make safer recruitment decisions.
- Following completion of all recruitment checks applications for shared lives carers were presented to an independent panel for approval.

Using medicines safely

- Medicines were used safely.
- Shared lives carers with responsibilities for managing medicines had completed medication training. They also had their competency checked regularly to assess their ability to perform the task safely.
- Care records included details of medication prescribed to people and the level of support they needed from their shared lives carer.
- Shared lives carers maintained a record of the medicines they administered to people they support, and these were checked on a regular basis either by the manager or care co-ordinator.

#### Preventing and controlling infection

- We were assured that safe measures were in place and followed to minimise the spread of infection including those related to COVID-19.
- Managers, staff and shared lives carers had received training in infection prevention and control and the use of PPE and they were provided with the most up to date IPC guidance.
- Shared lives carers provided people with the support they needed to maintain their safety throughout the COVID-19 pandemic. This included supporting people to access testing when needed, and vaccinations such as for flu and COVID 19.
- Shared lives carers told us they had a good stock of PPE. Shared lives carers were required to provide their own PPE as they were self-employed, and they told us the provider had advised them about where they could access supplies from. The manager told us they held a stock off PPE and would supply it to shared lives carers should they need it in an emergency.

#### Learning lessons when things go wrong

- There were procedures for reporting any accidents or incidents and learning when things went wrong.
- The manager understood their responsibilities for investigating the cause of incidents and accidents and the importance of learning lessons to reduce further occurrences.



## 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 our last inspection we rated this key question was good. At this inspection the key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The service had a manager in post and they had applied to CQC to become the registered manager.
- The manager understood their role and responsibilities and regulatory requirements; including events they are required to notify CQC about.
- Office based staff including a care co-ordinator, and an administrator were employed and worked alongside the manager to provide support to shared lives carers and the people they supported. The provider was in the process of recruiting a second care co-ordinator. An area manager provided regular support to the manager and oversight of the service on behalf of the provider.
- Care co-ordinators and shared lives carers had clear lines of responsibility and access to the providers policies and procedures to guide them on current national guidance and best practice.
- A range of checks and audits were completed at regular intervals to assess and monitor the quality and safety of the service. Where areas for improvements were identified they were actioned promptly.

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 ethos and values of managers, staff and shared lives carers promoted a culture which was personcentred and inclusive.
- People told us they felt well supported by managers and staff and that they had formed positive relationships with them.
- Shared lives carers felt the service was well-managed. Their comments included; "The manager is fantastic, a breath of fresh air, can't do enough."
- The manager understood their responsibilities under duty of candour.

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

- Managers, staff and shared lives carers worked in partnership with others to make sure people received all the care and support they needed.
- The views of people and shared lives carers was obtained through care reviews, meetings, general discussions and surveys. Shared lives carers told us they had regular visits to their homes and telephone calls to check on how the placement was going and with offers of support. Their comments included; "We get regular calls and a visit at least every six weeks" and "We are kept up to date with any changes, there

have been lots during covid."

- During COVID-19 restrictions, shared lives carers and the people they support were invited to take part in remote events organised by the provider, including quizzes and art classes. A shared lives carer told us how these events had provided them and the person they supported with opportunities to meet and socialise with new people.
- Managers and shared lives carers maintained good links with other resources and organisations in the community to support people's preferences and meet their needs.
- The scheme is a member of Shared Lives Plus. This is the national membership body for Shared Lives Carers and Schemes offering support and guidance to members to help them enhance the quality of the service they provide.