

Glebe Housing Association Limited

Support Plus

Inspection report

Glebe Housing Association
Bencurtis Park
West Wickham
Kent
BR4 9QD

Tel: 02087771122

Date of inspection visit:
24 May 2017

Date of publication:
20 June 2017

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 inspection took place on 24 May 2017 and was announced. We gave the provider 48 hours' notice of the inspection because we needed to be sure the manager and staff would be in the office.

Support Plus is a domiciliary care agency situated within the grounds of Bencurtis Park which provides sheltered housing accommodation for older people. Support Plus provides personal care and support to older people living in supported accommodation and who live with dementia, physical disability and or sensory impairment. At the time of our inspection there were 11 people using the service.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission 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 and associated Regulations about how the service is run.

At our last comprehensive inspection of the service on 21 and 22 January 2016 we found a breach of legal requirements because people's risk assessments were not detailed and did not always provide guidance for staff on how to manage and mitigate risks to people's health and well-being.

At this inspection we found that the provider had made the required improvements relating to the breach of legal requirements.

There were appropriate safeguarding and whistle-blowing procedures in place and staff had an understanding of these procedures. Assessments were in place to support people where risks to their health and welfare had been identified. Appropriate recruitment checks took place before staff started work and there was enough staff to meet people's needs.

The registered manager and staff had a good understanding of the Mental Capacity Act 2005 and acted according to this legislation. Staff completed an induction when they started work and received training relevant to the needs of people using the service. Care plans detailed people's nutritional and support needs where required. People had support to access health and social care professionals if required.

People were provided with appropriate information about the service. People said staff were kind and their privacy and dignity was maintained. People were consulted about their care and care plans were in place that provided information for staff on how to support people safely and appropriately. People were aware of the complaints procedure and we saw complaints were managed appropriately.

There were systems in place to monitor the quality of the service provided to people. The provider took into account the views of people using the service through satisfaction surveys. The provider conducted unannounced spot checks to make sure people were supported in line with their care plans. There was an out of hours on call system in operation that ensured management support was always available to people

using the service and staff when they needed it.

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.

Risks to people's health and welfare were identified, assessed and documented. Assessments provided guidance for staff on how to manage risks.

Medicines were managed appropriately where people required this support.

There were appropriate safeguarding procedures in place and staff had a clear understanding of these procedures.

Appropriate recruitment checks took place before staff started work and there were enough staff to meet people's needs.

Is the service effective?

Good ●

The service was effective.

Staff completed an induction when they started work and received training relevant to the needs of people using the service.

Staff were supported in their roles through regular supervision and appraisals.

The registered manager and staff had a good understanding of the Mental Capacity Act 2005 and acted according to this legislation.

Care plans detailed people's nutritional and support needs.

People had access to health and social care professionals when they needed them.

Is the service caring?

Good ●

The service was caring.

People's privacy and dignity was respected.

People were supported to maintain their independence.

People were provided with appropriate information about the service.

People were involved in planning for their care needs.

People told us staff were kind, respectful and caring.

Is the service responsive?

Good ●

The service was responsive.

People's needs were assessed and reviewed to ensure the care provided met their needs.

Care plans detailed information and guidance for staff about how people's needs should be met.

People were aware of the complaints procedure and we saw complaints were managed appropriately.

Is the service well-led?

Good ●

The service was well led.

There was a registered manager in post.

There were systems in place to monitor the quality of the service provided to people.

The provider took into account the views of people using the service through satisfaction surveys and telephone monitoring calls.

The provider conducted unannounced spot checks to make sure people were supported in line with their care plans.

Staff said they enjoyed working at the service and they received support from the registered manager and office staff.

There was an out of hours on call system in operation that ensured management support was available when required.

Support Plus

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 unannounced inspection took place on 24 May 2017 and one inspector visited the service. Before the inspection we looked at the information we held about the service including information from any notifications. A notification is information about important events that the provider is required to send us by law. We also asked the local authority for their views about the service and used this information to help inform our inspection.

As part of our inspection we looked at the care records of five people using the service, staff training, supervision and recruitment records and records relating to the management of the service. We spoke with the provider's chief executive, the registered manager, office staff and two care staff. We also visited and spoke with two people using the service in their homes to gain their views about the service they received.

Is the service safe?

Our findings

At our previous comprehensive inspection in January 2016 we found a breach of regulation in that people's risk assessments were not detailed and did not always provide guidance for staff on how to manage and mitigate risks relating to people's health and well-being. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulation 2014.

At this inspection we saw action was taken to identify and assess risks to people using the service. Newly implemented risk assessments and action plans were in place which identified risk to people for areas such as mobility, personal care and medicines management. We also noted risk assessments detailed the importance of care staff ensuring people had their sensory aids such as their glasses in place to ensure safe mobility. Guidance for staff on how to meet individual's health needs and risks were documented within people's care plans. For example one person's risk assessment documented the steps care staff were required to take to ensure the person could easily access equipment which enabled them greater independence. Another person's risk assessment provided guidance for staff on how best to support the person to mobilise safely in and out of their home environment.

At the time of our inspection there was no one using the service that required support with administering their medicines. However some people did require reminding or promoting to take their medicines as prescribed and for those people we saw that there were systems in place that ensured medicines were managed safely. People's care plans recorded the current medicines people were taking and information about any support people required. Medicines risk assessments were in place when required that detailed any risks and support people required to take their medicines safely. We saw that staff had completed medicines training and had their competency assessed to ensure that if required they had the appropriate skills and knowledge to support people in managing their medicines safely.

People told us they felt safe with the staff that visited them. One person commented, "I feel very safe living here. The carers that visit are very good and very friendly." Another person told us, "The carers are wonderful, no problems at all." There were safeguarding and whistleblowing policies and procedures in place to ensure people were protected from possible harm. The registered manager, office and care staff were aware of their responsibility to safeguard people and staff we spoke with demonstrated an understanding of the type of abuse that could occur, the signs they would look for and what they would do if they thought someone was at risk of abuse. Staff training records demonstrated that staff had received safeguarding training to ensure they had the knowledge and skills to support people appropriately. We also noted safeguarding information and professional's contact details were clearly displayed within the staff office for staff reference and the provider's 'policy of the month' which was on display was whistleblowing. The registered manager told us they held a 'policy of the month' discussion with staff which enabled staff to refresh their knowledge in key areas.

There were systems in place to ensure accidents and incidents involving the safety of people using the service were recorded and managed appropriately. Where appropriate we also saw, accidents and incidents were referred to local authorities and the CQC as appropriate. Accident and incident records demonstrated

staff had promptly identified concerns, taken appropriate actions and referred to health and social care professionals when required. Information relating to accidents and incidents was clearly documented and demonstrated people were supported to remain safe.

People told us they could call for support when required and their requests were dealt with promptly. One person said, "The office staff are very good. They are always there to support me if I need them." There were arrangements in place to manage foreseeable emergencies. An 'out of hours' on call system was in place which enabled people to call for support if required outside of office hours. Staff told us that management and office support they received was good. One member of staff said, "The support I get is very good. If there are problems or I'm not sure about something and its late there is a system which lets me speak with the manager."

People told us they felt there were enough staff to meet their needs and they had regular staff that visited them. One person said, "I have had the same carer visit me for years. They always come when they are supposed to. They are very good." We saw there were enough staff employed at the time of our inspection to support people using the service promptly and appropriately. Staff rotas confirmed that people were appropriately supported when they requested and cover for staff on leave or unwell was managed within the service. The provider had systems in place to check on staff working within the local community ensuring staff arrived on time and people's calls were completed at the correct duration they were contracted for.

Appropriate recruitment checks took place before staff started work to ensure their suitability to work in the care sector. Staff files contained completed application forms, details of employment history, evidence confirming references had been obtained, proof of identity documentation and criminal records checks. Staff told us they were issued with a staff handbook to support them in their role and whilst out of the office and identity badges and uniforms were also provided to enable people using the service to identify them safely before allowing them to enter their homes.

Is the service effective?

Our findings

People told us staff knew them well and understood their needs. One person said, "My carer is excellent and understands me. They know exactly what to do each day and how I like things to be done." Another person commented, "The carers are very knowledgeable and know what they are doing. They are very helpful."

Staff told us they received training appropriate to their needs and the needs of people who they supported to enable them to carry out their roles effectively. One member of staff told us, "We get lots of different training which is very helpful. We have training that we do online and training based in a training room that the provider has." Another staff member said, "Training we have is good. We have training updates to make sure everything we do is correct." Staff records we looked at demonstrated that training was provided on a regular basis and included topics such as equality and diversity, moving and handling, safe administration of medicines, health and safety, infection control, safeguarding adults and The Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards amongst many others.

There were systems in place that ensured staff new to the service were provided with an induction and appropriate training that the provider considered mandatory. Staff told us they had completed an induction programme when they started work which included becoming familiar with the providers policies and procedures, attending training and shadowing experienced members of staff on the job. One member of staff told us, "My induction was good. I had lots of training and worked with other carers which was helpful and showed me what I needed to do for people." The registered manager told us that all new staff were required to complete an induction in line with the Care Certificate. The Care Certificate is the benchmark that has been set for the induction standard for new social care workers. Staff records confirmed that staff had completed an induction programme when they started work to ensure they could meet people's needs effectively.

Staff were supported through regular supervision and annual appraisals of their performance in line with the provider's policy. One member of staff told us, "I have supervision every few months which I find helpful. I can speak with the manager about any issues I have although I can speak with them at any time which is good." Staff records confirmed that supervision sessions were provided to staff on a regular basis and provided staff with the opportunity to discuss a range of topics including their progress in their role, any training needs and any issues relating to the people they supported. Annual appraisals were also completed on all staff which meant any shortfalls in knowledge, skills or training could be identified promptly and addressed.

Staff we spoke with were aware of the importance of gaining consent from people when offering or providing them with support. One member of staff told us, "All of the people I visit have capacity and are independent in making decisions. I always seek their permission before I offer support and never just do anything without first asking."

There were arrangements in place to comply with the Mental Capacity Act 2005 (MCA). 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. This provides protection for people who do not have capacity to make decisions for themselves. We checked whether the service was working within the principles of the MCA. The registered manager told us that people using the service were able to make decisions about their day-to-day care needs such as the personal care they received but mental capacity assessment were completed for some people whose capacity was variable and care records we looked at confirmed this. They told us if someone did not have the capacity to make decisions about their care, their family members and health and social care professionals would be involved in making decisions on their behalf and in their 'best interests' in line with the Mental Capacity Act 2005. The registered manager confirmed that no one currently using the service was deprived of their liberty.

There were systems in place to ensure people were supported to have enough to eat and drink where this was part of their care plan. At the time of our inspection most people did not require support to cook or prepare meals to meet their dietary and nutritional needs and some people told us they often visited the on-site restaurant at lunch time. However, where people did require support with meals this was recorded in their care plans, including directions for staff on making drinks and preparing breakfasts. One person told us, "The carers make my breakfast for me in the mornings. I can manage during the day."

People told us that office and care staff supported them when required to access health and social care services. One person said, "I am able to call for the doctor but if I was very unwell then I am assured that care staff would help me get the support I need." We saw that people independently accessed health service when required, however staff were available to offer support in making health care appointments or to accompany people to attend appointments if needed. Staff told us they monitored people's well-being and would notify the office if they noticed any changes in people's general health. Daily records were kept by staff documenting people's daily health and care need and were contained within peoples care plans. The registered manager told us they would contact people's relatives or health professionals if they had any concerns about a person's well-being.

Is the service caring?

Our findings

People told us they were happy with the service and found staff helpful, respectful and caring. One person said, "My carer that visits is great. They are so friendly and jolly." Another person commented, "They are well mannered and very helpful. Very caring in everything they do."

People told us they were involved in decision making and planning for their care and support. One person said, "The office staff ask if I'm well and if everything is working well. The manager often visits as well." Another person told us, "I started using the service after I suffered from a fall. I knew what I needed support with and they arranged the care I needed." Care records we looked at showed that people and their relatives where appropriate had been involved in their care planning and were provided with opportunities to express their preferences in relation to the care and support they received. One person told us they had a preference for a male carer to visit them and commented, "They are excellent."

People were provided with appropriate information about the service when they started in the form of a 'resident user guide' which was kept in their homes for reference. The registered manager told us this was given to people when they started using service and included information on the standard of care people can expect, contact details for office staff and out of hours and the services and facilities provided within the local community. People we spoke with confirmed that they were given a copy for their reference.

People told us they were encouraged and supported by staff to retain their independence as much as possible whilst ensuring their safety. One person said, "I like to try to do most things for myself but for the things I am unable to do the carers help me." Another person told us of the facilities on site that they used and the activities they liked to attend which care staff supported them to achieve. They said, "I like to attend an activity in the afternoons. I call the office and the carer comes to support me to get there in my wheelchair."

People were supported by staff that had the right experience and skills to meet their needs and staff we spoke with demonstrated they knew people's needs well and had built good relationships with people. One staff member told us, "We are a small team so people get to know us well and we get to know them really well. I like my job very much because of this." Another staff member told us, "We visit the same people all the time so everyone knows each other well. When we are away we cover each other's shifts." The registered manager told us how they tried to maintain the continuity of care for people to enable good professional relationships to develop by building good team ethics and relying on the provider's staffing team to cover work allocated between them.

People told us they were treated with dignity and respect and their privacy was respected at all times. One person commented, "Staff are very respectful. They always knock and announce themselves before entering." We observed that staff addressed people by their preferred names and entered people's homes respectfully and with permission. Staff we spoke with told us of how they maintained people's privacy and dignity for example, by closing doors and drawing curtains when providing personal care and by knocking on doors and seeking permission before entering.

Is the service responsive?

Our findings

People told us staff were responsive to their needs and they had a care plan of their assessed needs and wishes in place available in their homes. One person said, "I have a copy of my care plan here. The carers complete their paperwork when they visit."

Assessments were undertaken to identify people's physical and mental health needs before they started using the service. The registered manager told us that assessments were also completed by funding authorities where appropriate and this information helped them in assessing people's on going care needs.

Care plans were developed from information gathered from people and reflected their individual needs. Care plans included information about people's needs and preferences including people's physical and mental health, medicines, personal care, mobility, communication, nutrition and social networks. Care plans provided guidance for staff to help them meet people's needs and were kept up to date and reviewed on a regular basis with people and their relatives where appropriate to ensure they met people's changing needs. For example we saw that one care plan had been amended and updated to reflect the person's need for extra support following an illness. The registered manager told us care plans were reviewed every six months or when required and were also checked to ensure they were current when they conducted spot checks within people's homes.

Staff were knowledgeable about the care needs of the people they supported and were able to tell us about people's specific health conditions and other health and social care professionals they worked with to ensure they were responsive in meeting people's needs. For example they knew people's appointment schedules and when times of visits were changed to reflect this and when people required support to venture out and participate in activities.

Staff were also knowledgeable about people's needs with regards to their disability, race, religion, sexual orientation and gender and supported people appropriately to meet their identified needs and wishes. Staff gave us examples of how they supported people to meet their lifestyle choices, for example by supporting them to venture out and access local services. The registered manager told us that staff received training in equality and diversity and privacy and dignity to ensure people's needs were met appropriately and records we looked at confirmed this.

People told us they were aware of the provider's complaints procedure and were confident that their complaints would be listened to and investigated appropriately. One person said, "I haven't needed to raise any concerns but if I had any problems I would speak with the manager." Another person commented, "I would speak to the office or the manager. The office staff are very good and supportive." The service had a complaints policy and procedure in place. The registered manager showed us a complaints file which included a copy of the provider's complaints procedure and records from complaints made to the service. We saw that where complaints were raised these were investigated and responded to appropriately in line with the providers policy.

Is the service well-led?

Our findings

People spoke positively about the care and support they received and told us they felt the service was well led. One person commented, "The service is very good. I have no problems at all." Another person said, "It's an excellent service, very well run." Staff also commented positively on the management and running of the service. One member of staff told us, "I have been working for the service for a number of years and am very happy. It's very well run and the management is supportive." Another member of staff said, "The manager and office staff are very good and helpful. Everybody is very friendly and supportive. The service is well managed."

There was a registered manager in post at the time of our inspection and they were experienced and knowledgeable in the health and care sector and about the requirements of being a registered manager and their legal responsibilities with regard to the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Notifications were submitted to the CQC as required and the registered manager demonstrated good knowledge of people's needs within the local community and the needs of the staffing team. Throughout our inspection we saw the registered manager spent time talking with people using the service and staff. There was also an out of hours on call system in operation that ensured management support and advice was always available to people using the service and staff when they needed it.

Staff told us they were happy in their work, were able to seek management support and speak to the manager and office staff when required to enable them to do their job. They told us communication within the service was good and one member of staff commented, "Because we are a small service we see each other often. We also have meetings on a regular basis to make sure everything is running well." We saw that staff meetings were held on a regular basis to provide staff with the opportunity to meet and share good practice or to discuss issues of concern. Staff were provided with a staff hand book as a guide to remind them about the services and their roles and how to respond to emergency situations whilst out working in the community.

There were systems in place to regularly monitor the quality and safety of the service provided to people. The registered manager showed us that audits and checks were conducted on a regular basis to assist in maintaining the quality and standards of the service. Areas covered as part of the auditing processes included care plans and care records, medicines, complaints, call bells, falls, accident and incidents, infection control, health and safety, staff training and supervision and staff on site spot checks to ensure staff wore uniforms and identification badges and that people received a good service. We saw that where issues had been identified as a result of audits conducted action plans were implemented to address and record actions taken. For example, we saw the training audit conducted in March 2017 highlighted that training was required for staff in diabetes and Parkinson's care and actions were taken to seek appropriate training although this was not part of the provider's mandatory training programme.

Regular surveys were conducted to seek people's views about the service they received. We looked at the results for the survey conducted in August 2016 which was positive. People rated the service stating that they were either 'satisfied' or 'very satisfied' with the support they received. Comments included, "Very good

service" and "Great value for money."