

# Provide Community Interest Company Tekhnicon House

## Inspection report

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11 February 2020  
17 February 2020

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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

Tekhnicon House is a supported living service providing personal care to four people at the time of the inspection. People lived in a domestic style property and shared communal areas.

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

People told us they felt safe and liked the way staff supported them. Staff received safeguarding training and knew how to report their concerns internally and externally to local safeguarding authorities. Risks to people's health and well-being were identified and effective measures were in place to mitigate these. People's medicines were managed safely.

People were supported to have maximum choice and control of their lives 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. Staff felt supported and well-trained to understand and carry out their roles effectively. People told us they had enough food and drinks and staff helped them stay healthy by supporting them to exercise and make healthy food choices.

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.

People and relatives told us staff were always respectful and showed kindness to people. People were involved in their care and where appropriate their relatives participated in regular reviews. People's dignity and privacy was promoted.

People were supported to attend day centres and plan the activities they liked to do regularly like shopping, going to cinema and exercising. Regular outings were organised so that people could visit places. The complaints procedure was shared with people in a pictorial and easy read format so that they knew how to raise concerns.

Audits completed by the registered manager and the provider were effective in identifying areas in need of improvement and actions were taken to improve the quality of the service provided.

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

This service was registered with us on 01 February 2019 and this is the first inspection.

#### Why we inspected

This was a planned inspection based on when the service registered.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Tekhnicon House

## 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.

#### Service and service type

This service provides care and support to people living in a 'supported living' setting, 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 24 hours' notice of the inspection. This was because the service is small, and people are often out and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 10 February 2020 and ended on 17 February 2020. We visited the office location on 11 February 2020.

#### What we did before the inspection

We reviewed information we had received about the service since they registered. We sought feedback from relatives of people using the service, the local authority and professionals who work with the service. 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.

During the inspection

We spoke with two people, two relatives, two care staff, the manager of the service and the registered manager.

We reviewed a range of records. This included two people's care records and multiple medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

# Is the service safe?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- One person told us, "I feel safe here. I have a button in my room and I can press it when I need help. Staff help me." Relatives told us they trusted staff to keep people safe and had no concerns.
- Staff received safeguarding training and they knew how to report their concerns internally and externally to local safeguarding authorities.
- Staff told us that they communicated well with each other. This meant that where information had to be shared to improve the support people received it was cascaded to every staff member.

Assessing risk, safety monitoring and management

- Risk assessments were in place to ensure staff had guidance to support people safely. They knew how to support people to encourage independence.
- One person said, "Staff are coming with me when I go out. This makes me feel safe."
- Staff knew how to support people who had behaviours that challenged others safety. Staff were trained, and community nurse support was place for the one person to help implement positive behaviour support plans.
- Procedures were in place to ensure staff were able to safely evacuate people in case of an emergency such as a fire. Plans were in place to start practicing evacuation with people so that they could get familiar with how to respond when they heard the fire alarm.

Staffing and recruitment

- People told us they had staff around to support them in a timely way and with activities they liked to do.
- Staff told us there were enough staff, although at times staff vacancies were covered by agency. Agency staff went through an induction and shadowed a permanent staff member, so they could support people safely.
- Recruitment processes were robust and ensured that staff employed were suitable to work in this type of service. Pre-employment checks included criminal records check, references and full employment history for future employees.

Using medicines safely

- Medicines were administered safely by staff who were trained and had their competency assessed. Medicine administration records were signed by staff after administering people's medicines and the stock we checked corresponded with the records kept.
- When people spent days away from the service their medicines were signed out and in when they returned so that accurate records could be kept.

## Preventing and controlling infection

- People were involved in keeping their rooms clean.
- Staff ensured infection control procedures were in place. Personal protective equipment was readily available to staff when assisting people with personal care. Staff had also completed infection control training.



# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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 prior to them moving into the service. This assessment detailed people's support needs and preferences and formed the basis of the care plans.
- People were invited to visit the service and meet other people living there before a decision was made that they moved in. This helped to ensure that people living in the service got on well and they were happy living in the same house. One person told us, "When I visited I realised I knew [other people living there]. We went to school together. I was so happy."

Staff support: induction, training, skills and experience

- Staff felt well supported by their line manager. One staff member said, "[Service Manager] is really supportive and approachable. Always ready to help."
- Newly employed staff completed an induction prior to starting work. This included learning of policies and procedures, on-line training and face to face training. Staff shadowed more experienced staff until they were competent and confident to work alone.
- In addition to the induction training staff received annual refresher training in areas such as safeguarding, food safety and infection control.
- Relatives felt that staff were well trained. One relative said, "We are worry free because staff know how [family member] likes to be supported. They are very knowledgeable."

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

- People told us they were involved in planning and preparing their meals. One person said, "Staff are helping me lose weight. I plan what I want to eat, and we go out shopping. We prepare food together."
- People's dietary needs and requirements were identified in their care plans and staff had a good understanding how to support people with these.

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

- People told us staff helped them attend their annual health checks and any other appointments they had. A range of health care professionals like, GP, opticians, chiropodist, community nurses and psychiatrists helped people maintain good health.
- People had regular reviews of their care and support needs by their social worker and health professionals.
- Relatives told us staff could identify when people were not feeling well, and they involved the appropriate health care professionals to ensure people were getting the right support when they needed it.

- People were encouraged to keep a healthy lifestyle. Staff supported people to go out for regular walks and exercise.

#### 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. We checked whether the service was working within the principles of the MCA.

- Care plans evidenced if people had capacity to decide about their care or treatment and what was done in case people lacked capacity to make certain decisions like the management of finances or administer their own medicines.
- Decisions for people who lacked capacity were taken following a best interest process. This involved relatives, independent advocates and health and social care professionals to ensure the care people received was in their best interest.
- The Registering the Right support national best practice guidance for supporting people with a learning disability and autism was fully adhered to by the provider and staff.
- People were included in their care, their opinion mattered, and they were supported to be an active part of their community.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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 told us staff were kind to them. One person said, "I like staff. They are nice to me." Another person told us they would talk to staff if they were upset because they trusted them.
- One relative told us, "Staff are lovely, they have a great sense of humour and are very kind."
- Staff we spoke with told us about the people they supported. They spoke with compassion and in a caring way. During our visit we observed staff were always courteous and kind towards people they supported.

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

- People were involved in their care. They told us they made decisions on what they wanted to do daily, what they wanted to wear and what they ate.
- Relatives told us they were involved in their family member's care and their views were listened to. One relative said, "We are very much involved, but staff listen to [family member] and this makes them happy."
- Staff recorded people's views in their care plan where people could say how they liked to be supported. Staff had monthly meetings with people to review their care plans and we saw that changes were made where people requested this. For example, a person changed their routine for personal care.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect when helping them with daily living tasks. They knocked on people's doors before they entered.
- People's bedrooms gave them privacy and space to spend time on their own if they wished. Bedrooms reflected people's personalities and were decorated with pictures and posters on the walls.
- Records were stored securely, and staff understood the importance of respecting confidential information. They only disclosed it to people such as health and social care professionals on a need to know basis.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. 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; 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 received care and support in a personalised way. They told us staff knew what they liked and how they liked to be supported.
- Care plans were still developing, and plans were in place for these to be more outcome focused so people's achievements could be better reflected.
- People and relatives told us that staff supported people with their planned activities. One person said, "I go to the day centre every day and to [relative] at the weekend."
- People had planned weekly activities which included outings, day centres, shopping trips and going to the cinema. In-house activities were provided by staff on a daily basis depending on people's preferences.

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 care plan detailed their communication needs. Staff told us how in addition to verbal communication, they learnt to read people's facial expressions, sign language and body language. Staff also used pictorial menu forms and other pictures to aid communication with people

Improving care quality in response to complaints or concerns

- Relatives told us that staff were very responsive to their feedback or any concerns they reported. This meant that issues were resolved before they had to complain. One relative said, "We have no complaints. If we raise anything it is dealt with promptly."
- The provider's complaints procedure was shared with people and relatives to ensure they knew how to raise their concerns.

End of life care and support

- The service had not provided end of life care at the time of the inspection. This was an area the registered manager and the service manager identified as needing developing.
- They told us they were planning to discuss with people, their wishes and preferences about the care and support nearing the end of their lives.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- People and relatives told us they were happy how the service was run. One relative told us, "Over the years we used many services but so far this is the best. It's very well run, and I would recommend it."
- The registered manager and the service manager used various audits and quality assurance processes to monitor the quality of the care provided to people. Where actions were needed to improve these were implemented and discussed with the staff team.
- The provider had a good oversight of the service and they collected information such as safeguarding incidents, accidents and incidents from the service and monitored actions taken by the service manager and registered manager.

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 told us they promoted transparency within the team. They openly communicated with people, family members and health and social care professionals.
- When events occurred in the service that required notifying to CQC or the local authority these were completed promptly.

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

- There were clearly defined roles for staff working in the home. Staff told us they had known their responsibilities and how the provider was expecting them to deliver care and support to people.
- Meetings and handovers were used as an opportunity to share any learning across the staff team and give staff the opportunity to fully engage in the running of the home.
- Staff told us they felt confident in raising issues in staff meetings and they felt listened to. One staff member said, "I will raise an issue in the staff meeting coming up. I know they [provider] will listen."
- Staff were well trained to understand how to support people effectively. The service manager ensured they requested appropriate training for staff.

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

- People told us they communicated with staff if they wanted something to change and they were listened. Relatives told us staff were receptive to their suggestions.

- The service is newly registered, and no formal surveys had been sent out to relatives or people. The registered manager told us they were planning to send out the yearly surveys shortly.

#### Working in partnership with others

- The service worked closely with local funding authorities, clinical commissioning group and other health and social care professionals to ensure people's needs were met.