The Camden Society

West Oxfordshire Supported Living

Inspection report

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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
This service is based in Witney, Oxfordshire, and provides personal care and support to people with learning disabilities residing in the North Oxfordshire area. There were 23 people receiving support from the service at the time of the inspection. Supported living is where people live in their own home and receive care and support in order to promote their independence.

People's experience of using this service and what we found
The culture of the service ensured the provision of support was person-centred. Management and staff were committed to the provision of care and support. People were supported and empowered by staff to control their own lives and live a life which was meaningful to them.

The service applied the principles and values of Registering the Right Support and other best practice guidance. This ensured that people using the service could live as full a life as possible and achieve the best possible outcomes that included control, choice and independence.

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 told us they felt safe, and staff knew whom to contact if they suspected any abuse had taken place. Individualised risk assessments promoted positive supported risk taking. A robust system of learning from incidents kept people safe.

Staff felt very supported with an induction and role specific training, which ensured they had the knowledge and skills to support people. Staff received regular supervision and annual appraisals and were able to reflect on the care and support they delivered.

People were supported to have maximum choice and control of their lives and staff provided them with care in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People were treated with the utmost respect, dignity, empathy, and compassion. They were empowered to make choices to live a life they wanted. The service had gone to great lengths to ensure people's preferences and opinions were heard, and the support given was tailored to the individual needs of people.

People continued to be involved in the planning, management and reviewing their support. Each person had a care and support plan, written with them, which reflected their physical, mental health, social and emotional needs. People spent much of their day out in the local community doing the things they wanted and with the people whose company they enjoyed. They were supported to develop and maintain

relationships with those who mattered to them. People told us they did not have any complaints but would speak to the registered manager or staff if they were not happy about something.

The provider had systems in place to monitor and improve the quality and safety of the service provided.

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

Rating at last inspection
The last rating for this service was good (published 4 April 2017.

Why we inspected
This was a planned inspection based on the previous rating.

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?

Good

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good

The service was well-led.

Details are in our well-Led findings below.

West Oxfordshire Supported Living

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
This inspection was carried out by one inspector.

Service and service type
This service provides care and support to people living in 10 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. The 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 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or the registered manager would be in the office to support the inspection.

What we did before the inspection
We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We reviewed information

we had received about the service since the last inspection. We used all of this information to plan our inspection.

During the inspection
We spoke with five people using the service. We spoke with four members of staff, including the assistant manager. The registered manager was not available on the day of our inspection. We reviewed a range of records. These included care records four people's and their medication records. We looked at four staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, such as policies and procedures, were reviewed.

After the inspection
We continued to seek clarification from the provider to validate evidence found. We spoke with two relatives of people, one staff member and one professional who regularly works with the service.

Good

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People told us, and their relatives confirmed, that they felt safe. One person told us, "I feel safe." Another person stated using Makaton that they were safe. Makaton is a language programme that uses symbols, signs and speech to enable people to communicate. One person's relative told us, "Yes, I believe she is safe with them."
- The service had systems in place to protect people from abuse and avoidable harm. Staff understood the safeguarding policy and knew what to do and whom to report if they had any concerns about people's safety.
- As required, reports were made to the local authority and the Care Quality Commission when concerns about people's safety were identified and appropriate action was seen to be taken.

Assessing risk, safety monitoring and management

- People's individual risks were assessed, recorded and managed. These included risks such as those involved in personal care, self-administration of medicines or using public transport.
- Risk assessments were regularly reviewed, and necessary changes were made. There were systems in place to ensure that staff were kept up-to-date with changes to the care plans, so they continued to meet people's needs.
- The provider had a system to record accidents and incidents, and we saw appropriate action had been taken where necessary.

Staffing and recruitment

- People continued to be supported by staff who had been recruited safely. Robust checks were completed to make sure new staff were suitable to work with people.
- People receiving support and their relatives confirmed there were always sufficient numbers of staff to meet people's needs.
- Staff told us, and records confirmed there were enough staff to meet people's needs safely. A member of staff told us, "I think there is enough staff to meet people's needs. Most shifts on the rota are covered by our permanent or bank staff. Agency workers are mainly used to cover unexpected absences."

Using medicines safely

- Staff were trained to support people with their medicines and had their competency checked to make sure they followed best practice.
- Each person had a detailed medicines care plan which also included the use of 'as required' medicines, such as paracetamol.

● Records were kept of medicines staff administered. These were checked regularly to help ensure any errors were identified and relevant actions were taken to reduce future errors.

Preventing and controlling infection
● Staff understood their responsibilities in relation to infection control and food hygiene.
● Staff had access to personal protective equipment, for example, gloves and aprons. This helped to minimise the risk of infections spreading.

Learning lessons when things go wrong
● The service had a system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences.
● We saw from records that the service had dealt appropriately with a concern and put measures in place to reduce the risk of recurrence.

Good

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.

At the last inspection this key question was rated 'good'. At this inspection this key question has remained the same. 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 physical, mental health, emotional and social needs were assessed, monitored and reviewed to achieve effective outcomes.
- The provider considered people's protected characteristics under the Equality Act to make sure that if the person had any specific needs, for example relating to their religion, culture or sexuality, staff could meet those needs.

Staff support: induction, training, skills and experience
- New staff completed an induction and shadowed more experienced colleagues. Their competency was assessed before they began to provide people with support independently.
- Staff was provided with supervision and appraisals where they could reflect on their role with their line manager. Staff told us they could also ask for advice and support at any time.
- Training was monitored to make sure staff refreshed their knowledge and kept up with best practice. Training topics were based on people's support needs, for example epilepsy management or diabetes awareness.

Supporting people to eat and drink enough to maintain a balanced diet
- People were encouraged to make decisions about what they wanted to eat and drink. People received support to get involved in preparing their own meals.
- Staff told us that they went shopping with people and encouraged them to make healthy choices.
- People's food and drink related preferences were recorded and understood by staff.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support
- Staff worked closely with other agencies such as district nurses, social workers, GPs, dentists and speech language therapists (SALT) to make sure that people's needs were met.
- People had up-to-date Health Action Plans and hospital passports to ensure crucial information was easily shared between services.
- The service had systems and processes for referring people to external services. Records confirmed that detailed documentation from health and social care professionals were available in people's care files.

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.

- Staff understood the importance of gaining consent before providing support. The provider had a clear process for obtaining consent before care and treatment were provided.
- Staff had received training in the MCA and understood the importance of asking for people's permission before providing care and support.
- People confirmed staff respected their wishes and asked them for their consent before carrying out a task.

Good

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 confirmed that staff were kind, caring and compassionate. We observed staff demonstrate a real empathy for the people they cared for.
- Staff told us they respected people's differences and provided them with person-centred care that reflected people's protected characteristics.
- Staff demonstrated their awareness of people's likes and dislikes. For example, they knew how people liked to have their drinks served and what foods they enjoyed.

Supporting people to express their views and be involved in making decisions about their care
- Staff involved people in their care and supported them to make choices and decisions about everyday tasks and activities.
- Care plans clearly described how people should be given information in a way they could understand it and the level of support they required with their communication needs.
- People and where appropriate their relatives were involved in regular reviews of people's needs to ensure the support and care they received met their preferences and decisions.

Respecting and promoting people's privacy, dignity and independence
- Staff supported people to develop and maintain independent living skills ranging from basic self-administration of medicines to more extended activities such as meal planning, shopping and preparing a meal.
- Staff told us they respected people's privacy and dignity. A member of staff told us, "Staff don't discuss people's private issues in the presence of other people or members of the public. We make sure people look respectable and live in a clean and healthy environment."
- People's records continued to be stored securely to protect their confidentiality.

Good

Is the service responsive?

Our findings

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

At the last inspection this key question was rated 'good'. At this inspection this key question has remained the same. 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

- People continued to receive care and support that was tailored to and responsive to their needs. People told us they were involved in planning their support to make sure they continued to have as much choice, control and independence as possible.
- People's physical and mental health, social needs and lifestyle choices were reflected in the care plans and provided staff with a detailed insight into people's backgrounds.
- People received personalised care and support specific to their needs and preferences. Care plans reflected people's health and social care needs and demonstrated that other health and social care professionals were involved.

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.

- Various types of information, such as policies and procedures, had been converted into different formats to help people understand the information and make informed choices. Examples included Makaton, assistive technology software and social media apps.
- People's communication needs were known and understood by staff. People's care plans included details which helped staff learn about how people expressed their needs. Staff were skilled at supporting people with their communication needs.

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

- Reasonable adjustments were made to ensure people had the opportunity to engage in employment and in activities that were important to them. People took pride in their achievements as they used the money earned through their employment to plan and go on foreign holidays. One person told us, "I got a pay rise, I work and I used my money to go on holiday abroad. I am so happy about being independent."
- People were encouraged to maintain relationships with their friends and family. People told us they also felt supported by staff to maintain and to develop personal relationships.
- People engaged and participated in their own interests and hobbies with the support of staff. People were supported to carry out activities in the community according to their needs and preferences.

Improving care quality in response to complaints or concerns

● There was a complaints process which everyone was aware of. People and their relatives said they knew how to complain and felt their complaint would be appropriately investigated and responded to.
● There were no complaints raised with the service since our last inspection.
● Staff told us they encouraged people to talk about any issues, so they could be resolved quickly.

End of life care and support
● At the time of the inspection there was no one being supported at the end of their life. However, the management knew how to access relevant support from other healthcare professionals should this be required.
● Staff told us people's advanced wishes would be respected.

Good

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 the last inspection this key question was rated 'good'. At this inspection this key question has now remained the same. 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

- The service had a positive culture that was person-centred, inclusive and empowering. The provider had a clear vision to promote independence and empower people to make choices, which was clear throughout our inspection.
- Staff told us they shared the vision and values of the provider. A member of staff told us, "The vision of our service is: 'people with a learning disability can be leaders'. I think our values are privacy, confidentiality, dignity, anti-discrimination, independence and promoting choice."
- Staff told us the service was managed well and the registered manager made themselves available to provide support if needed.

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 was clear about their regulatory responsibilities. The Care Quality Commission (CQC) and the local authority had been notified of important events, such as safeguarding concerns, in line with guidance.
- The management team promoted transparency and honesty. They had a policy to openly discuss issues with relevant parties if anything went wrong.

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

- Effective checks and audits were completed on all aspects of the service. When a shortfall was identified, action was taken to reduce the risk of it happening again.
- Staff understood their roles and responsibilities and were motivated to provide positive outcomes for people.
- Regular staff meetings gave staff the opportunity to feedback on the service. Meeting minutes showed topics discussed included health and safety, training and development, and activities. We saw that staff used this opportunity to share best practice and to learn about the provider's new policies.

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

- People and their relatives continued to be encouraged to give their views about the support people received. The most recent survey was very positive and reflected people's satisfaction with the support they

received.
● The registered manager and the staff team promoted an open and inclusive culture. They shared a good understanding of equality, diversity and human rights.
● The service had an 'open door' policy and said staff knew the registered manager would be available to listen to any concerns of staff and to provide solutions to address these.

Working in partnership with others
● The service worked with housing associations, social workers, colleges, GPs and wider community to ensure relevant information was passed on and the continuity of care was ensured.
● We received positive feedback from a health care professional. The professional told us, "The staff are very responsive when I request information about incidents, and they are very responsive when I make any suggestions, and they are keen to try to implement any recommendations I have made. The staff are good at keeping records, e.g. records of the client's behaviour and have been able to supply me with this information when I have requested it. I find the staff to be very thoughtful and caring about how they support the client I am working with. The staff are good at making themselves available when I request to meet them. I find The Camden Society staff team a pleasure to work with."