

Active Support Clifton Ltd

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Inspection report

Cedar Court
Church Street, Clifton
Sheffield
S17 5ET

Date of inspection visit:
09 May 2023
13 May 2023
16 May 2023

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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?

Outstanding ☆

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Active Support Clifton Limited is a respite service where people stay for short periods of time of up to 14 days at a time. The service provides support to autistic people and people living with a learning disability. People have access to their own bedroom when they stay at the service and share communal areas such as a lounge, kitchen and garden. The service was supporting 10 people.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection the service was supporting 3 people with personal care.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

Reasonable adjustments were made so that people could be fully involved in discussions about their support. Staff communicated with people in their identified and preferred methods.

People benefitted from an interactive and stimulating home environment and were supported not to feel isolated. People were supported to use the service with other people who they had built meaningful and lasting friendships with.

Staff supported people to be independent if this was their choice. The staff team had a focus on supporting people to learn and maintain new skills.

People were being supported to pursue their interests and achieve their aspirations and goals. The staff team were exceptionally effective at supporting people to do this.

The service gave people care and support in a clean environment which met their physical needs and people were able to personalise their bedrooms.

The service worked with people to plan for when they experienced periods of distress so that their freedoms were restricted only if there was no alternative.

Staff supported people safely with their medicines.

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.

Right Care:

Staff had the training and knowledge to support people effectively. This had led to some fantastic outcomes for people, such as being supported to take part in recreational pastimes they had not been able to do for some time.

People's support plans fully reflected their range of needs and promoted their wellbeing and enjoyment of life. Staff supported people to assess any risks they might face in a safe way and supported people to take positive risks.

Staff promoted people's equality and diversity. People received kind and compassionate care which fully promoted their privacy and dignity.

Staff encouraged people to try new things which may enhance their wellbeing and enjoyment of life. People and their relatives told us about the significant and positive impact this has on them/ their family member.

Staff members knew people well and communicated with them in a kind and compassionate manner.

Right Culture:

People and those important to them were involved in planning their support. People received consistent support from a staff team who knew them well.

People received good quality care and support and were supported to lead inclusive and empowered lives. Staff were responsive to people's needs and worked well together to achieve good outcomes for people. Feedback from people and relatives about the service was exceptionally positive.

The registered manager and staff team were passionate about continually improving the service and supporting people to achieve their goals and aspirations.

Staff worked hard to achieve good quality care and good outcomes for people. This had led to some amazing experiences for people who were truly at the centre of every aspect of their support when they stayed at the service.

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

Rating at last inspection

This service was registered with us on 27 January 2022, and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 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?

Outstanding ☆

The service was exceptionally 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.

Active Support Clifton Ltd

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.

As part of this inspection, we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was completed by 1 inspector.

Service and service type

Active Support Clifton Limited is a 'care home' used as a respite service for people. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Active Support Clifton Limited is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

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 09 May 2023 and ended on 16 May 2023. We visited the service on 13 May 2023.

What we did before the inspection

We reviewed information we had received about the service since they registered with us. 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

We spoke with 2 people and 3 relatives about their experiences of the service. We spoke to a support worker, the registered manager and the director of the service. We reviewed 2 people's care records and medication records. We looked at 1 staff file in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures and quality assurance records were reviewed.

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 of 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

- People and their relatives told us they/ their family member were safe at the service. One relative told us, "When [family member] stays at the service I can relax completely knowing they are safe."
- Staff had a good understanding and were trained in safeguarding. They knew what signs may constitute potential abuse and knew how to report concerns to external organisations such as the local authority safeguarding team and CQC.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager put risk assessments in place for people depending on their support needs such as moving around the service or living with health conditions. Some of these risk assessments would have benefitted from more detail. The registered manager accepted this and showed us evidence risk assessments had been updated.
- Staff completed health and safety checks, including fire safety at the service to help ensure the environment was free from risk. One person used body language to explain how staff checked their room before they stayed at the service to make sure it was safe.
- The registered manager had systems in place to learn lessons when things went wrong. These included meetings with staff and putting mitigations in place when incidents happened. One relative said, "If anything happens [registered manager] rings me and lets me know what they will be doing to make things better next time."

Staffing and recruitment

- People and relatives told us there were enough staff to support them/ their family member safely. One person told us, "[Staff] are always here and I like seeing them." A relative said, "The staffing at the service works really well as there are only a few staff so [family member] has built a good rapport with all of them."
- The registered manager understood the pressures of having a very small staff team at the service. They explained their plans to recruit and were also carefully assessing people's needs before they used the service to ensure these could be met with the current staff team.
- The registered manager completed checks in line with legislation, to make sure staff were suitable to work at the service.

Using medicines safely

- People were supported safely with their medicines. The registered manager explained the systems they had in place to monitor medicines coming in and out of the service and how these were being administered. One person physically showed us how their medicines were managed at the service and gave us a 'thumbs up' to indicate this was done safely.

- Some people required 'as and when needed' (PRN) medicines. The registered manager put detailed protocols in place to guide staff when and how to administer these. The registered manager audited medicines regularly to help ensure errors were not made.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- People and relatives were positive about the cleanliness and look of the service. One relative told us, "The service always looks sparkling and clean and the staff support [family member] to do some cleaning if they feel like it."
- Relatives and friends were able to visit the service to see people at any time.

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 before they used the service. Assessments focused on people's preferences and specific support needs. One relative said, "Prior to [family member] using the service [registered manager] came and visited us and asked lots of questions to make sure they got things right. I was assured by this."
- The registered manager and staff team fully embraced Right Support, Right Care, Right Culture and supported people fully in line with this statutory guidance. For example, people already using the service were fully involved in meeting potential new admissions to make sure they got on well with them and would have the opportunity to form strong and positive relationships. The registered manager also told us their plans to involve people in the upcoming recruitment of new staff to the service.

Staff support: induction, training, skills and experience

- Staff had the right training and knowledge to support people effectively. The registered manager researched people's support needs and sourced specific training for staff if this was needed. One relative told us, "The staff are very knowledgeable, and I have full confidence in them. I think the training is impeccable."
- Staff felt well supported in their job roles and had supervisions and observations of their competency to make sure training had been sufficient.

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

- People were supported to eat and drink in line with their support needs. They were able to eat and drink whenever they wanted and were given a large choice of meals. Staff often cooked different meals for each person using the service depending on their preferences. One person told us, "The food here is amazing mate. I can have pancakes all the time if I want."
- Some people needed direct staff support with eating and drinking. Staff knew how to support them with this and had good knowledge about how to prepare foods in certain ways.

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

- People were supported to follow any advice from health professionals, and this was included in their support plans. Most people were supported to access health appointments by relatives; however, they told us they trusted staff to support people. One relative said, "I had no problems asking staff to support [person] to health appointment. They would always do this if I needed them to."
- Staff supported people to stay healthy in various ways such as promoting healthy eating, regular fluid

intake and regular exercise. Staff knew the signs which may indicate people needed access to other healthcare services. One relative told us, "[Staff] know all the signs to look for which show that [family member] needs more support from [health professional]. They ring and let me know if this is needed."

Adapting service, design, decoration to meet people's needs

- The service was designed to meet the physical needs of people and there was plenty of space for people to move around the service at their leisure. The registered manager ensured people had access to any equipment they needed. One relative explained how a specific piece of furniture had been sourced for their family member so they could comfortably sit with their peers in the communal area.
- People chose the rooms they would stay in at the service and were encouraged to personalise these when they stayed. One person excitedly told us about the view of the garden they had from their room.
- The registered manager told us their plans to further improve the garden area of the service with sensory equipment. They were liaising with people to find out what equipment would be most beneficial to them.

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 MCA 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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff respected people's decisions and gave them a choice in all aspects of their support. If people lacked capacity, assessments were completed, and decisions were made in their best interests. One relative said, "I love how involved [family member] is involved in every little thing that happens at the service."
- Staff were trained and had a good understanding of the MCA and how to put this into practice when supporting people.

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 felt staff were kind and compassionate. We observed staff speaking with people in a friendly and upbeat manner and people responded positively to this. One person said, "The staff are really good. They are amazing and just so good." Another person told us staff were 'nice' and showed their excitement at seeing staff using signs and body language.
- Relatives also felt staff were caring and supported their loved ones with compassion. Relatives' comments included, "All the staff are so kind and caring and have built a good relationship with [family member] that works well." and, "[Family member] is very relaxed and happy with the staff team because they feel so comfortable with them."
- Staff knew people well as individuals and respected their preferences and choices. For example, staff knew how people liked to have their food presented to them.

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

- People were involved in day-to-day choices about their support. Staff supported people to make decisions using pictures and photos to help aid their understanding of the choices on offer. One person said, "I get to make all the choices here. It makes me feel really good." Another person showed us photographs of them being supported to make decisions.
- People and their relatives were involved in wider discussions about their support and were asked to feed in to support plans and risk assessments. One relative told us, "We are always asked to check the care plan and make sure it is up to date and we always suggest changes as and when and these are put in place."

Respecting and promoting people's privacy, dignity and independence

- People were supported to be independent if this was their choice. Staff supported people to cook, clean and take part in other domestic tasks. One person said, "I have learned how to cook what I like." A relative told us, "The difference in [family member] since they started using the service is astounding. They have become their own person."
- Staff respected people's privacy and dignity and knew when to give people their own space.

Is the service responsive?

Our findings

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

- Without exception, people and relatives were incredibly positive about the support they had at the service. We received an overwhelming amount of positive feedback about how the staff team supported people in a person-centred way and supported them truly as individuals, completely in line with their preferences. Whilst only 3 people of the 10 using the service were receiving support with the regulated activity, we also saw evidence that all people using the service had been supported to achieve truly person-centred outcomes that were important to them.

- Relatives told us there was a strong visible, person-centred culture at the service and how the staff team had supported their family members to be confident, learn new skills and reach their full potential. Staff spoke with people in a patient and understanding manner, supporting them to identify goals and community-based pastimes important to them. They then involved people in every aspect of planning how these could be achieved, supporting them at first and then enabling the person to be more independent as they became more confident. One relative said, "[Family member] is so much happier since using the service and have really come out of their shell. It brings a tear to my eye to see how far they have come."

- People were full in control of their support and staff ensured they were given choices in all aspects of the service to make sure their needs were met. Staff spoke with people about every aspect of their care and support, offering choices to people in ways that made sense to them. One person said, "How do I feel living here? Let me tell you- I feel awesome. It is amazing here." This person's relative elaborated, "[Staff] have helped [family member] become their own person. They cannot wait to go back to the service and see it as home from home. They describe it as having a break from us rather than the other way around which I think speaks volumes."

- Another person had found it difficult to use services in the past and had found it hard not to be with their family members. Staff worked with this person from the moment they came into the service, carefully discussing their support and tailoring it to meet their specific needs and preferences. This person happily showed us using signing and body language, how delighted they were to stay at the service and how they looked forward to their visits. This person excitedly showed us how they counted down the days until they stayed again. This person's family member explained, "We were very worried about [family member] using the service. We need not have worried. [Staff] put us and them at complete ease and [family member] sees it as a home from home. The first question they ask when they get home is 'when can I go back.' It has made such a difference to them being away from us and doing their own thing."

- One of the key values of the registered manager and staff team was supporting people to be a part of their local community and supporting people to try new social pastimes. People were involved from the start of the process of choosing what to do. Staff supported people to research places of interest and to then attend this and the impact this had for people was astounding. One person had been supported to access the community for numerous experiences which they had been unable to do before. This person spent time showing us photographs of this and was visibly thrilled about the experiences they had. This person's family member said, "[Staff] treat [family member] like their own family and they encourage them to do things they would never have done otherwise. The effect this has had for them has been nothing short of marvellous

and we feel they have got their zest for life and soul back."

- Another person spoke with us about the difference the service had made to their life. They told us, "I prefer staying here to anywhere else. This place is so awesome, and I am so happy here." They showed us photos of the incredible amounts of places they had visited in the community and the relationships and friendships they had been supported to make by staff at the service.
- One relative spoke to us about the excellent way staff had worked with their family member to help ensure their transition and first stay at the service was a success. Staff went above and beyond and researched specific ways to support the person with their support needs, feeding this back to the person's relative to ensure the transition worked well. This relative explained, "We were nervous as [family member] had not had good experiences in the past. However, as soon as [staff] met [family member] it just felt right. They live with [support need] and the staff team explained confidently how they would support them with this and keep them safe. The way they spoke with [family member] and read their body language was phenomenal and I really felt like they wanted understood how they spoke and understood things."
- This person had also found it difficult to access a social pastime they used to enjoy. However, the staff team had proactively and positively planned, and risk assessed for this person to access this social pastime in a supportive and inclusive way. They had explained the visit to the person carefully and supported them using pictures to understand what would happen. The result of this was monumental for the person. Their relative explained, "We had tried [social pastime] so much with [family member] but it was always too much for them. When the staff team suggested they try I could not believe how carefully they had planned everything. [Family member] had an amazing time and stayed the full duration of [social pastime]. When they next saw us, they were so proud of themselves. This was such a success because staff understand my family member so well and pre-empt how they are feeling and their support needs. It was just brilliant." Staff told us how they were using these same techniques to plan the next social pastime with the person, meaning they had
- The staff team had a focus on supporting people to improve their health and wellbeing. They followed advice from health professionals to the letter and this resulted in massively positive impacts for people in their wider lives. One relative said, "[Staff] follow [health professional] advice to the point where there has been a significant improvement in [family members] mobility. They are more stable and more confident to independently go where they want. It has been absolutely incredible, the difference in them." Another relative told us, "[Family member] has always struggled with drinking healthily, but [staff] have worked intensively with them and they now [drink liquid and appropriate amount] on a regular basis. This has been fantastic for them."
- As well as these fantastic examples of support, the registered manager had also worked to build friendship groups between people who used the service. They identified where people using the service got on well and encouraged people to stay at the service at the same time so they could build relationships. One relative explained, "[Family member] is supported to stay at the same time as people who they get on really well with. This has resulted in them having true friends who they cannot wait to see whenever they visit the service."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People were supported in line with their communication needs and staff were trained and knowledgeable in using signing, picture cards and technology to support people to communicate.
- One person used a piece of technology to communicate with and staff had supported this person to use

this to its fullest potential. This person had been supported to create custom pictures and phrases to use with this technology and this had enabled them to make their needs known more easily.

Improving care quality in response to complaints or concerns

- The registered manager had put a detailed complaints procedure in place at the service. Whilst people and relative's had not needed to raise concerns at the moment, they all felt comfortable to do so if needed. One relative said, "You can probably tell I have absolutely nothing but good things to say about the service but I would 100% feel comfortable raising any issues with [registered manager.]"

End of life care and support

- No one at the service needed end of life care and support. The registered manager told us how they would support people with this if the need arose and how they planned to have discussions with people and family members about this subject.

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

- The registered manager and director had forged a very positive culture at the service which empowered people and helped them achieve outcomes and life goals. One person explained the service as "Where my real friends are." A relative said, "There appears to be nothing the staff members cannot do, and they are constantly looking to help [family member] be the best they can be."
- The registered manager and staff team had embraced the ethos and values of Right Support, Right Care, Right Culture and implemented this successfully at the service. People were firmly at the centre of their support. See the responsive section of this report for details about the outcomes people had been supported to achieve.

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

- The registered manager and staff team had a good understanding of their job roles and spoke to us about these confidently. One relative said, "The staff are trained, confident and want what is best for [family member]."
- The registered manager had implemented audits to monitor the quality of the service. However, some of the systems they had in place were not being used consistently by the staff team. The registered manager accepted this and gave us assurances systems had been reviewed and were now going to be used effectively.
- The registered manager was keen to continually improve the service and had a number of actions plans in place to help achieve this. They responded positively to our feedback and saw this as a learning opportunity to continue to improve the service.

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

- People and their relatives were fully engaged with and asked to feed back about all aspects of the service. This was in the form of formal and informal meetings. One relative said, "I speak to staff most days and they constantly ask me how things are going. I get lots of feedback about how [family member] is getting on and whether they are enjoying what they have been up to."
- Staff felt well supported by the registered manager of the service and were given the opportunity to share their thought about what was working well and what may need more improvements. Staff told us they felt

listened to and empowered to share their thoughts.

- The registered manager understood their responsibilities under duty of candour. They knew when they would have to report incidents to CQC and what incidents would need to be brought to them attention of relatives if something happened to their family member.

Working in partnership with others

- The staff team linked and worked with health professionals and followed their advice to help people achieve good outcomes.
- The staff team had built good working relationships with the local community, so people were supported to build consistent and meaningful relationships when they took part in their social pastimes and interests.