

Inclusive Support Limited

481 Ipswich Road

Inspection report

481 Ipswich Road
Colchester
CO4 0HQ

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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

481 Ipswich Road is a residential care home providing personal care and support to up to 5 people with a learning disability or autistic people. At the time of our inspection there were 5 people using the service.

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.

481 Ipswich Road is located in a residential area, similar in size and design to other properties in the road. It has a large garden and good access to the local community and its amenities.

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

It was evident from interactions observed that people were confident and relaxed in approaching and interacting with staff and they felt comfortable and safe in their environment. Relatives were positive about the care people received. One relative told us their family member was, "always happy" and another told us, "We're still in the settling in period, I haven't seen any indication that [name] is not happy there and that is of paramount importance."

Right Support:

The registered manager told us their primary aim was to provide a homely environment, to support people to increase their independence, maximise their potential and promote inclusion. This was evident throughout our inspection.

People were supported to have maximum choice and control of their lives and were enabled to live fully integrated lives within the community. One person awoke that morning and decided they wanted to take a train journey to the seaside and they were supported to do as they wished. They returned very excited showing off their purchases. Staff supported people in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Care and support was continually reviewed and revised to ensure best outcomes for people. Relatives and professionals were extremely complimentary about the service and what it provided.

Right Care:

People received kind and compassionate care from staff who understood their individual and specific needs. Care and support planned and delivered was personalised and tailored to the individual's needs, respecting their rights and diversity. Management and staff understood how to protect people from poor care and abuse. They had a positive attitude towards managing risk and keeping people safe. A professional told us, "On first impression, when I first entered the building, it was apparent this was a busy home and

there was plenty going on. The general feel of the atmosphere within the home was of a very caring place to be. Both service users and staff appeared content".

People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs. People who had individual ways of communicating using pictures and symbols or Makaton (a form of sign language) could interact comfortably with staff and others involved in their care and support. Staff were alert to emotional communication and responded effectively to signs of distress, anxiety and frustration in line with detailed personal behaviour support plans.

Right Culture:

There was a strong emphasis on promoting good practice in the service and there was a well-developed understanding of equality, diversity and human rights and management. Staff put these into practice enabling people to live as full a life as possible. People were supported to achieve best possible outcomes that included choice and independence. The registered manager inspired confidence in the staff team and led by example.

The provider had a thorough recruitment and selection process in place to check that staff were suitable to work with people who used the service. There were enough staff to meet people's needs effectively. Staffing levels were flexible to support people to follow their interests, take part in social activities or attend hospital /GP appointments and follow ups with healthcare professionals.

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

Why we inspected

This is a new service registered with us on 31 March 2022 and this is the first inspection.

We undertook this inspection to assess the service was applying the principles of right support, right care, right culture.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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?

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 ●

481 Ipswich Road

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

The inspection was carried out by one inspector.

Service and service type

481 Ipswich Road is a 'care home'. 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. 481 Ipswich Road 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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service, including information gathered as part of monitoring activity that took place on 16 November 2022. We sought information from partner agencies and received feedback from 5 professionals who work with the service. We used the information the provider sent us in the provider information return (PIR) in February 2023. 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.

The inspection

The people who used the service were unable to verbally converse with us due to their complex communication needs. We, therefore used informal observation to evaluate their experiences and to help us assess how their needs were being met. We also observed how staff interacted with people. We looked at records in relation to people's care. We had contact with three people's relatives.

We spoke with the registered manager, the manager and the team leader. We looked at records relating to the management of the service, staff recruitment and training, medicines management and systems for checking the quality and safety of the service.

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; Learning lessons when things go wrong

- Management and staff had a good understanding of keeping people safe; the processes to follow if they had concerns and how to report them. They worked well with professionals and incidents were used as an opportunity to learn lessons, change practice and drive improvement.
- A professional told us, "There has been challenging events during the bedding in of the service and the manager has been able to cope and keep the residents and carers safe and able to return to a state of stability within a very short time". They said, "I have been made aware of incidents where things have not gone as to plan. When this has happened, I have seen that the manager and team have been able to review incidents, reflect upon them and make necessary changes. This includes raising safeguards where necessary and including residents and family where appropriate within the reflection process".
- The transition of young people into their new home and adult services is not easy. A relative told us, "It has been a difficult transition but they are wonderful, they think outside the box to resolve issues which have worked and helped [name] to settle and keep [name] safe".
- Staff supported people to manage their day to day expenses and records showed this was managed appropriately and safely.

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- Professionals told us management and staff recognised and understood people's emotional distress and associated behaviours, and took a pro-active approach to develop a safe and supportive environment.
- Staff followed detailed risk assessments and associated support plans which contained guidance on the actions to take to minimise risk, and provide the right personalised support.
- People living with epilepsy had good seizure management practices in place, informing staff and decreasing the risk of SUDEP [Sudden unexplained death in epilepsy].

Staffing and recruitment

- People were supported by enough suitable staff to keep them safe and meet their individual needs.
- Staff levels fluctuated on a day to day basis. They were adapted according to the type and level of support each person required in relation to going out, planned activities and appointments.
- Pre-employment checks were undertaken before new staff began to work at the service to ensure new staff recruited were suitable and safe to carry out their role.

Using medicines safely

- People received their medicines as prescribed.
- Staff received training and their competence was assessed to administer medicines safely.
- There were robust systems in place to help ensure medicines were managed safely; to detect errors and take prompt action if any errors were found.
- A healthcare professional told us how well the service was working with them in supporting a person to reduce their previously prescribed antipsychotic medication. They told us the service worked accordingly with the principles of STOMP [stopping over-medication of people with a learning disability, autism or both] and people's behaviour was not controlled by excessive and inappropriate use of medicines.

Preventing and controlling infection

- The service was clean and hygienic throughout. We were assured management and staff were supporting people living at the service to minimise the spread of infection and respond effectively to any risks and signs of infection.
- The provider's infection prevention and control policy was up to date and provided guidance for staff on how to prevent or manage infection outbreaks with details of other agencies to alert in the event of an outbreak.
- Effective infection prevention and control measures were in place to prevent people, staff and visitors from catching and spreading infections.

Visiting in care homes

- Visitors were able to visit when they wanted to. The registered manager had systems in place to facilitate visits in a way that allowed them to minimise people's anxieties and manage the risk of people bringing infection into the home.
- A professional told us, "They always welcome any visits from family members. They also encourage and facilitate any overnight stays at the family home where appropriate."
- People's rooms were big enough and furnished to facilitate visits in private and in the comfort of their own personal space.

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

- Detailed and comprehensive assessments fully considered each person's diverse needs, choices and expected outcomes. People's care and support was regularly reviewed.
- Opportunities for viewing visits and over night stays are provided to support a smooth transition to moving in.
- The management team kept up to date with new guidance and developments and had links with organisations that promote and guide best practice.

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.

- The Registered Manager had a good working knowledge of the Deprivation of Liberty safeguards and the key requirements of the Mental Capacity Act. They put this into practice effectively and ensured that people's human and legal rights were respected.
- People's capacity was considered when taking decisions and where they did not have capacity to make a particular decision management and staff knew what they needed to do to make sure decisions made were in the person's best interest, involving family and the right professionals.
- Appropriate strategies were used to support a person's ability to make a decision for them self where possible and people were given opportunities to make choices and decisions throughout the day.
- DoLS applications for people were completed with families and professionals.
- A pictorial/easy read decision making tool was in place for some people which identified decisions they could make on their own and when support was needed.

Supporting people to live healthier lives, access healthcare services and support

- Staff supported people to access routine health screening and check ups, as well as reviews of prescribed medicines and any long term conditions such as epilepsy.
- People's care records included a Health Action Plan (HAP) which detailed the actions needed to maintain and improve the person's health and wellbeing, and any support they needed to achieve it. It linked to a range of services including annual health checks, medication reviews and monitoring of long term health conditions such as Epilepsy.
- The service was experiencing challenges in accessing community dental health care for people.

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

- People were supported to have enough to eat and drink.
- Staff promoted healthy eating and supported people to balance choice with healthy options.
- People were involved in menu planning and shopping. A person went through the shopping list with us before they went out shopping showing us what were their preferences and choices.

Staff support: induction, training, skills and experience

- People's needs were met by a staff team that had the right competencies, knowledge, skills and attitude they needed to carry out their role safely and effectively. Staff received a range of training which included learning disability and autism awareness and positive behaviour support.
- A professional told us, "The level of training offered to carers is of a high standard and where a deficit has been identified training has been provided at the earliest practicable opportunity."
- As it is a small service staff received continuous support from seniors and management in their day to day work. However, formal and recorded supervisions were infrequent and management acknowledged this.
- Assurances were given to address this because it was recognised safe protected time with their senior/manager was beneficial for staff to have the opportunity to discuss any issues, receive support they needed, guidance about their work or any training needs. Particularly important for new staff who had not worked in care, or this area of care, before.

Staff working with other agencies to provide consistent, effective, timely care

- One professional said, "They engage well and have a good understanding of people's needs, they work very hard for the people they support."
- Another told us, "When an issue has been raised where Specialist Service Support is appropriate, the service at 481 Ipswich Road has been quick to request support in a professional and detailed manner."

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

- The service provided a homely and comfortable environment.
- The premises were adapted according to individual support needs and preferences.
- People's bedrooms were spacious; some had furnished areas where they could comfortably have their own space or spend private time with friends and family.
- Staff encouraged and supported people to individualise their rooms with items, photos and posters they favoured and meant something to them. Other people due to their complex needs preferred a minimalised environment and this was addressed well.

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

- The atmosphere within the service was welcoming, warm and relaxed. We observed positive relationships.
- Management and staff had a good rapport with each individual and responded to them respectfully with warmth, kindness and compassion.
- Relatives and professionals were consistently positive about the caring attitude of management and staff. A healthcare professional told us, "I am very impressed with the level of care and dedication shown to people."

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- Staff involved people and supported choice as much as possible throughout the day in relation to what they wanted to do, where they wanted to go and what they wanted to eat and drink.
- People were continually engaged with a member of staff in a meaningful way, within the home or going out, unless they chose not to be. We saw people going about their daily lives popping out for an ice cream, going out for a walk, a train trip to the seaside, supporting staff to do the weekly shop and receiving education.

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 responsive and personalised care and support planned proactively in partnership with them and/or their parents. A professional told us, "The team at 481 Ipswich Road have excelled at involving the residents' families." Relatives confirmed they were involved 'every step of the way.'
- Another professional told us, "The management and staff understand the young people's needs, wishes and feelings and they provide person-centred care and support. Independent living skill development is incorporated in each daily activity."
- A relative told us the home delivered a very personalised service and their family member likes to walk every day, "Staff walk with [name] no matter what the distance and sometimes it's miles and miles!"
- Care and support plans were sufficiently detailed to guide staff on the level and nature of care and support each person needed, and the way they preferred.
- 'This is me' documentation contained important and relevant information to enable staff to understand the person, including their likes, dislikes, preferences, what is important to them, their background, methods of communication, favourite activities, sexuality and relationships
- Arrangements for social activities and education met people's individual needs.
- A professional told us, "The team are all keen in providing meaningful activities for the residents both in-house and when accessing and participating in the community. Because of the needs of the residents these are individualised, person centred and chosen by the individuals themselves."

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.

- Staff knew people's individual communication skills, abilities and individual preferred methods. They were able to communicate effectively with individuals either by speech and/or, pictures and symbols or Makaton (a form of sign language) or by interpreting gestures, signs and body language.
- A relative told us, "Staff are willing to engage and have patience with the young people there; they are willing to learn new communication techniques or styles of interaction. I felt it was a good setting for [name], his speech has much improved since living there."
- A professional told us, "There are a lot of communication tools used within the service and this is

successful for the residents to be able to express their needs and the carers to be able to understand and respond to those needs."

- For people with planned activities they had pictorial weekly activity planners to refer to.

Improving care quality in response to complaints or concerns

- The providers complaints policy was freely available in the service in alternative formats, and contained relevant information including contact details of external agencies and advocacy services to support people if needed.
- A relative told us, "I have no complaints so far and I'm sure if I did it would be addressed." Another relative said there had been 'teething problems' but these 'were dealt with immediately.'

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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The service is well managed with effective organisation and leadership. The registered manager also manages the providers other three small local services also for young people with a learning disability and/or autistic people.
- The registered manager was well supported by the homes manager and between them provided 24 hours on call cover for guidance, advice and emergency cover to 481 Ipswich Road.
- A healthcare professional told us, "The experience with above service has been more than positive. They are excellent, caring and well led. I work really closely with the managers and they have managed different crisis and incidents very well."
- Feedback about the service was sought through formal meetings, such as individual service reviews held with relatives and various professionals.
- The registered manager told us they had overcome difficulties by working in an inclusive way, applying a problem solving approach, learning lessons and improving outcomes for people. These were all being recorded to monitor and review.
- There were good quality assurance systems in place that ensured the quality and safety of the service delivered, and used to drive improvement.

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

- This was a new service in its infancy which was clearly developing, adapting and improving in a bespoke manner in response to the varied situations and incidents experienced.
- Management and staff worked well with various health and social care professionals for the benefit of people using the service.
- A professional told us, "481 Ipswich Road staff have worked closely with parents, behaviour advisors and other professionals throughout the young people's transition, settling periods and after. Their communication is open and honest with parents and professionals."
- Behavioural strategies and incidence reports were regularly reviewed and analysed identifying any triggers or patterns at which point positive changes were made to assist prevention of similar incidents.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good

outcomes for people

- The service had a very clear vision and set of values which staff were clear about and put into practice.
- Equality and diversity was actively promoted throughout the service.
- The registered manager and staff team showed a commitment to provide high quality person centred care, that was open, inclusive and empowering. A professional told us, "Management and staff are there for the young people holistically."
- Care and support was delivered in a safe personalised way with dignity and respect, and ensured equality and independence was promoted at all times. This was consistently observed throughout the inspection. People communicated to us they were happy.