

Creative Support Limited

Creative Support - Tameside Personalised Services

Inspection report

The Old Vicarage
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Tel: 01613435777

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12 July 2023

13 July 2023

17 July 2023

18 July 2023

19 July 2023

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14 November 2023

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

Creative Support – Tameside Personalised Services is a supported living service providing personal care to people across Tameside. The service provides support to people with dementia, mental health, older people, people with physical disabilities, autistic people and people with learning disabilities. At the time of our inspection there were 57 people using the service.

The service supports people in multiple settings across Tameside including shared houses and their own individual flats. 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.

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: People were supported as individuals by a staff team who knew them well. People were supported with person-centred care and their wishes were respected. Staff supported people to improve their overall health and fitness with healthier eating and increasing their exercise levels.

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 supported people with person-centred care. People's dignity was consistently respected by staff. People's characteristics and individuality were respected. People were supported and encouraged to engage in activities they enjoyed. Staff were passionate about supporting people to live their lives fully.

Right Culture: There was a positive culture which ran throughout the organisation. Staff at all levels were committed to providing good care to people and felt supported and empowered by leadership. Staff strived to help people achieve more and reach personal goals to improve and enhance their lives. Staff supported and encouraged people to develop and maintain relationships.

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

Rating at last inspection

The service was last inspected on 18 September 2020. This was a targeted inspection and no rating was

given. The service was registered on 6 April 2020 and this is the first comprehensive inspection.

Why we inspected

This inspection was prompted by a review of 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?

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.

Creative Support - Tameside Personalised Services

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.

Inspection team

The inspection consisted of 2 inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service provides care and support to people living in 17 'supported living' settings, 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.

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 were 2 registered managers 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 12 July 2023 and ended on 25 August 2023. We visited the location's office on 12 July 2023 and 19 July 2023.

What we did before the inspection

We reviewed all the information the provider had sent us since registering. 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 also used information gathered as part of monitoring activity that took place on 25 August 2022 to help plan the inspection and inform our judgements. We contacted the local authority for feedback about the service. We used all this information to plan our inspection.

During the inspection

We spoke to 7 people using the service, 7 relatives of people using the service and 9 staff including support workers, team leaders and registered managers. We reviewed care records, staff records, and documentation related to the running 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

- People were safe from abuse. The service had effective systems in place to safeguard people from the risk of abuse. Staff had received safeguarding training and understood their responsibilities to report concerns.
- The service gathered comprehensive information regarding safeguarding concerns and shared any concerns appropriately with the local authority.

Assessing risk, safety monitoring and management

- Appropriate risk assessments were in place to monitor safety for people. Risk assessments included individual risks to people and environmental risks.
- Risk assessments relating to the premises were completed. The staff liaised with landlords on behalf of people living in the supported living houses to drive improvements. Fire risk assessments completed by the landlord were followed up, by staff, to prompt action. Staff continued to follow up outstanding actions with the landlords throughout the inspection.

Staffing and recruitment

- Staff were recruited safely. Prior to a member of staff commencing employment the service ensured necessary pre-employment checks such as references and criminal records checks were completed.
- Gaps in employment were not always clearly documented. We discussed this with the provider during the inspection. This was promptly addressed and the application form updated to improve their recording practice.
- People were supported by a regular, consistent staff team who knew them well.
- People using the service were involved in attending local recruitment fairs to assist in recruitment at the service.

Using medicines safely

- Medicines were administered safely. Staff had received training in the administration of medicines and their competency was regularly assessed.
- Medicines to support people's mental health were monitored to prevent the overuse of medication in line with nationally recognised guidance.
- Where people required specialist equipment to assist with their medication administration there was a clear detailed process in place for staff to follow to ensure this was done safely.

We received positive feedback from the relatives of people being supported with their medication. One relative told us, "[staff] support her with her medication, they are very careful with the timing, they contact the GP and inform us if they have any concerns about medication."

Preventing and controlling infection

- Staff followed infection prevention and control measures. Staff told us there was sufficient personal protective equipment (PPE) available at the service.
- The provider had an appropriate infection prevention and control policy in place.

Learning lessons when things go wrong

- The provider and management team were committed to driving improvement at the service. Accidents and incidents were recorded appropriately and analysis completed to identify improvements.
- The service had recently implemented a system to analyse trends in relation to medicine administration errors. This supported the service to target improvements and training in this area. When medicine errors occurred at the service, appropriate advice was sought and staff completed additional training and competency checks.

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

- Staff assessed people's needs and care plans were updated when required. Person-centred care plans were developed in response to thorough assessments of people's needs, risks and wishes.
- Care plans extensively covered their abilities and what is important to them.
- People's choices were considered and recorded throughout the care plans.
- We received positive feedback from the relatives of people using the service. One relative told us, "[name] has difficult behaviour, they [staff] manage them well. Incidents of temper and loud swearing are now less frequent, they understand the warning signs. [service user's name] is more settled, she no longer wants to come home."

Staff support: induction, training, skills, and experience

- Staff told us they felt well supported by the management team. Staff spoke positively about the support they received through regular communication with team leaders and managers.
- Staff received regular training and were empowered to access additional training courses such as National Vocational Qualifications (NVQs). Staff were able to make suggestions about training and they were listened to by the management team. For example, changing the training locations to make them more accessible for staff.
- Staff were in the process of completing Oliver McGowan training which is specific training to support autistic people and people with learning disabilities.

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

- Staff supported people to eat, drink, and maintain a balanced diet. Staff encouraged people to make healthier food choices and ensured these choices were available. One person was supported with a sectioned plate which included foods with nutritional value and food for enjoyment.
- Care plans clearly outlined how to support people with their eating and drinking and how to monitor for any concerns. Where necessary, the service contacted other health care professionals for advice and support.

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

- Staff supported people to live healthier lives. Some people using the service required support with their weight and fitness.

- Staff supported people to access healthcare services at their own pace. Some people at the service required support from staff to attend medical appointments as they displayed anxious behaviours around such appointments. Staff had supported people to overcome these anxieties which had a positive impact on people's health. One person now had reduced support for these appointments. Another person was supported to receive some appointments at home to reduce their concerns.
- Staff supported people to engage in activities which had positive impacts on their physical health. People were supported to walk and attend the gym. Staff told us as a result people had seen improvements in their physical fitness and their weight. For example, people were able to walk further and be involved in more exercise before becoming tired. People were proud to tell us about their achievements at the gym.

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. 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, 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 service were actively involved with people's families and social workers to facilitate Court of Protection documents being submitted.
- Staff supported people to make decisions and where necessary decisions were made in their best interest. People had choice in their decision making and were able to share their views including when they varied from the views of their family. As a result, people attended activities they enjoyed and spent more time with family.
- Where decisions were made in people's best interests, supportive plans and measures were put in place to monitor and ensure people were happy with the decision and it was still in their best interest.
- The service supported people to express their views in a safe environment so choices could be made in conjunction with their wishes.

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 were treated well by staff. We observed staff had a good rapport with the people they supported. Staff knew people well and how they liked to be supported.
- The provider had policies in place which promoted equality and diversity across the organisation. The provider targeted their approach in supporting and encouraging diversity.
- Staff treated people with respect as individuals and celebrated their characteristics. People's care plans included a section around what people say about the person as an individual and which qualities they valued in them.

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

- Staff supported people to express their views and be involved in making decisions about their care. Staff had a good understanding about people's preferred environments for decision making. For example, the time of day, location, and who they would like to be present to support their decision-making.
- We received multiple positive comments about the staff from relatives and people using the service. One relative told us, "Staff are delightful, excellent. I cannot speak highly enough about them, they keep me informed. When I visit I can tell [relative] is happy. The rapport is excellent and genuine."

Respecting and promoting people's privacy, dignity, and independence

- Staff supported people to maintain and increase their independence, where possible. People were encouraged and supported to complete daily lifestyle tasks. One relative told us, "They [staff] try to help [relative] lead as independent a life as possible."
- Staff demonstrated values around supporting people as individuals in a kind and compassionate way. The provider had multiple policies in place to protect people from discrimination.
- Staff encouraged people to further their skills, for example, supporting them with cooking and attending events outside of their home.

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

- People's care plans were personalised. People's care plans clearly outlined their needs and preferences. Care plans were specific to the individual and their preferences. Staff had included good detail about the people and how to support them as individuals with their specific needs and wishes.
- People were supported to communicate their choices and were given the time and support from staff to do so. People's choices were respected by staff.

Meeting people's communication needs

Since 2016 all organisations providing 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 people should get the support they need in relation to communication.

- People's communication needs were clearly recorded in their care plans. Some of the people being supported did not communicate verbally. The care plans identified how they communicated in non-verbal ways. For example, moving their body or getting their coat to show they would like to go out.
- Staff told us they knew how to communicate well with people. We observed staff understanding people's communication through their expressions. We observed staff using forms of sign language to communicate with people.
- There were easy-read versions of documents available for people to access.
- Staff were considerate of factors which impacted on effective communication. Staff approached people calmly and gave them the time and space they needed to communicate their wishes. We observed one person being reassured and not rushed to communicate their needs which allowed them to express how they would like to spend their day.

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

- Staff supported and encouraged people to maintain relationships with their families. People had varied plans around how they chose to spend their time. Staff supported people to choose how they would like to spend their time and engage in activities which they would enjoy.
- Staff supported people to engage in activities which had positive impacts on their physical health. People were supported to walk and attend the gym. Staff told us as a result people had seen improvements in their physical fitness and their weight. For example, people were able to walk further and be involved in more

exercise before becoming tired.

- Staff supported people to engage in activities at their own pace. Staff had suggested an activity to a person at the service they felt they would enjoy and would also benefit their health and wellbeing. The person had anxieties around this activity. Staff supported the person to become familiar with the activity over a period of months and gradually built up their exposure. This process enabled the person to successfully take part in the activity and they were able to express their joy and pride at achieving this goal.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy in place. The staff responded appropriately to complaints and recorded ways they had tried to overcome barriers and make improvements. There was also an easy-read version of the complaints policy in place. People at the service were familiar with this policy.
- The service have an 'ask, listen, do, share' document in place which identifies people's expectations and how the service will respond.

End of life care and support

- The service does not specialise in end of life care support. However, the service would support people at the end of their lives.
- Staff had received training in the provision of end of life care. Staff were knowledgeable about what good end of life care looked like. We observed staff supporting a person on end of life care with compassion and encouraging them with their food and fluid intake.
- The service had a comprehensive end of life care document in place. This gave people and their families the opportunity to record any wishes they may have for the end of their lives. The document was very detailed and covered multiple important areas regarding any service and burial. Staff were mindful not everyone would like to participate in these discussions and this was also recorded.

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 managers and wider management team promoted a positive culture throughout the service. Staff told us they felt empowered to make suggestions of how to improve the service and how to provide additional support to people to help them achieve their goals. Staff felt listened to in response to their suggestions.

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 managers fully understood their duty of candour responsibilities. The staff were open and honest when things went wrong.

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

- The registered managers fully understood their responsibilities. The registered managers supported leaders across the service and reviewed incidents across all the supported living settings. The registered managers were open and honest with sharing information with CQC.
- The management team regularly monitored the quality performance of the service. Following accidents and incidents at the service, the management team were responsive in identifying ways to mitigate future risk and proactive in identifying ways to identify trends.

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

- Staff are engaged in the service. Staff are included in a yearly national survey where they can provide anonymous feedback about their experience of working for the organisation. Where areas of improvement are identified this are fed back to local managers to review and implement.
- There was a regular staff newsletter which celebrated the work of staff and identified support available to them such as an employee assistance programme.
- People using the service were engaged and had the opportunity to be involved in recruitment by attending local job fairs showcasing the service.
- The service has an internal system of awards and grants. Staff and people using the service are encouraged to nominate people for awards covering multiple topics.
- People using the service formed the panel which determined the recipient of the awards. People we met

who had won awards were proud of their achievements.

- The provider has a grants programme in place. Staff supported people to apply for grants which would benefit their home or wellbeing. For example, people had successfully received grants to improve their gardens or celebrate events such as the King's coronation.

Continuous learning and improving care

- The management team and staff were passionate and committed to improving care for people. Staff were curious and consistently wanted to create more opportunities for people to improve their lives.
- The provider was open to new ideas from staff to further improve the service.

Working in partnership with others

- The service worked in partnership with other health and social care professionals to support people. The service engaged with relevant health care professionals when supporting people to make decisions about their care.