

Culmside Support LLP

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Inspection report

Smithincott Farm
Uffculme
Cullompton
Devon
EX15 3DG

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10 July 2019
12 July 2019

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24 July 2019

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

Culmside Support LLP provides personal care and support to people with a learning disability living within a Supported Living environment. At the time of the inspection six people were being supported by the service. The service employed eight care staff.

The accommodation provided small three-bedroom units, with shared communal spaces. The provider's office and staff room were not located within people's homes, but in a separate building within the grounds of supported living accommodation.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People were supported to stay safe by staff trained to recognise and respond effectively to the risks of abuse. Potential risks to people's health and well-being were identified and managed effectively in a way that promoted their independence. People were supported to take their medicines safely by trained staff. Sufficient numbers of staff were available to meet people's individual needs. Safe and effective recruitment practices were followed to help ensure all staff were suitable to do their jobs.

People were supported by staff that were well trained and received the appropriate support. People had their day to day health needs met with access to health and social care professionals when necessary. People were supported with a healthy balanced diet which met their needs. People were supported to have 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.

People were cared for in a kind and compassionate way by staff that knew them well and were familiar with their needs. People were involved in the planning, delivery and reviews of the care and support provided. People's privacy and dignity was promoted.

People received personalised care that met their needs and took account of their preferences. People were supported to pursue a wide variety of social interests and take part in meaningful activities relevant to their needs and wishes. People and their relatives were confident to raise concerns.

People, their relatives, staff and professionals were all very positive about the registered manager and how

the service was managed. Systems were in place to check the quality of the services provided; to manage risks and drive improvement. Staff understood their roles and responsibilities and felt well supported by the registered manager.

Rating at last inspection – Good (report published 24 January 2017)

Why we inspected

This was a scheduled/planned inspection based on previous rating.

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

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

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 ●

Culmside Support LLP

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one adult social care inspector.

Service and service type

This service provides care and support to people living in a 'supported living' setting, so that they can live in their own home as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

The inspection started on 10 July 2019 and ended on 12 July 2019.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We looked at notifications received from the service. A notification is the means by which providers tell us important information that affects the running of the service and the care people receive. We sought feedback from the

local authority who work with the service. We used all of this information to plan our inspection.

During the inspection-

We spoke with three people who used the service and one relative about their experience of the care provided. We spoke with four members of staff including the registered manager. We also met with a director of the company. We reviewed a range of records. This included three people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection –

We contacted five professionals who have contact with the service. We received a response from two.

Is the service safe?

Our findings

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

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

Good: This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People said they felt safe using the service. Comments included, "I like it here. Staff are nice to me" and "I am very happy here with my friends." A relative expressed complete confidence in the service, adding, "More than meets his needs; never have to worry about him here. It is a home from home. (Person) gets great care and attention here; it's just lovely."
- The provider had policies and procedures to safeguard people. Staff received safeguarding training to ensure they understood their responsibility to safeguard people they supported.
- Staff had a good understanding of safeguarding and how to report concerns. Three staff had completed an advanced level safeguarding course with the local authority.
- The registered manager and staff confirmed that physical restraint or seclusion was not used at the service. Some staff had attended training relating to 'behaviour as communication' and 'breakaway techniques' to help them understand how to deal with situations which may be challenging.

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

- Risk to people's health and well-being were considered and risk assessments promoted positive risk taking and enabled people to stay as independent as possible. For example, one person enjoyed daily time out in the wider community. There were procedures in place for staff to follow should the person not return home when expected.
- People had personal emergency evacuation plans (PEEP) in place so staff or emergency services were familiar with how to assist people in an evacuation.
- Any accidents or incidents were recorded and reviewed by the registered manager. This enabled them to address any issues raised and avoid possible re-occurrence. No serious accidents or incidents had occurred since the last inspection.

Using medicines safely

- People who needed help to manage their prescribed medicines were supported by staff who had received the appropriate training to safely assist them.
- Medicines were stored securely. Medication administration records (MARs) were appropriately completed by trained staff and showed people had received their medicines as prescribed.
- The registered manager carried out regular audits to ensure safe medicines administration practices were supported.

Staffing and recruitment

- There were sufficient staff to meet people's needs and preferences. The hours provided were commissioned by the local authority and were used flexibly to meet people's needs and preferences.
- People said staff were available when they required support. On-call arrangements were in place to ensure staff or people using the service could access support out of office hours.
- The provider had safe recruitment procedures and checks in place to ensure that staff employed were suitable to work at the service.

Preventing and controlling infection

- People were protected from the risk of infection because systems were in place to prevent and control infection. Staff had completed infection control training and had access to personal protective equipment, such as gloves and aprons.
- Staff supported people with their laundry and to keep their homes clean and tidy where necessary.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

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

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

- The registered manager fully assessed people's needs and preferences before they moved to the service. The registered manager was aware of the importance of personal dynamics within a small supported living setting and aimed to ensure new people were a good match for people using the service.
- Care plans contained information about how to support people's needs and preferences. These were reviewed annually or when people's needs changed.

Staff support: induction, training, skills and experience

- People were supported by trained and competent staff.
- Staff completed the provider's core training, which helped to ensure they worked safely with people. For example, food and fire safety, and moving and handling. Staff also received training related to the support needs of people using the service.
- Staff new to care were supported to complete the Care Certificate, a national induction training. New staff also had an opportunity to shadow experienced staff until they were confident.
- Staff confirmed they received supervision and an annual appraisal, which provided opportunities to discuss work or training issues and to hear feedback about their performance. Staff said they were well supported by the registered manager and described a team which worked well together. One said, "I just love working here. I never wake up not wanting to go to work".
- Relatives and professionals expressed confidence in the staff team. Comments included, "Excellent staff... like family. I have never had any concerns with this service at all" and "Staff are very knowledgeable".

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

- People were supported by staff to prepare and cook meals in their own homes. People were fully involved in creating weekly menus to suit their needs and preferences and shopped with staff regularly to buy supplies.
- People were supported to maintain a balanced diet. One person explained how staff supported them to reduce the risk of unwanted weight gain. Where required pictures were used to support people to make healthy food choices.
- One person required a specific diet. Detailed information had been developed to help them and staff understand the foods they could eat.

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

- People had access to a variety of health care professional to meet their needs. They were supported by staff, where necessary, to attend any medical appointments.
- People were registered with local dentists. One person received a service from a domiciliary dentist, which reduced their anxiety and meant they received the treatment they needed.
- We received very positive feedback from two health professionals. Comments included, "That service do things well; they seek any extra help and advice where needed" and "The person's health has improved since moving to the service".
- People were encouraged and supported to keep active. They accessed the local gym and swimming pool regularly to maintain fitness. People were supported to be active on the farm and they said they enjoyed spending time outside, especially with the animals.

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

- The registered manager and staff had developed good working relationships with external professionals and we received positive feedback from professionals.
- One professional said, "They are very open to advice and act on my recommendations"; another said, "I have no concerns about the service."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People said staff always involved them about decisions relating to their care and obtained their consent before any care or support was provided. People were fully involved in decisions about how they spent their day.
- One person was subject to a Court of Protection order and the registered manager understood the terms of the restrictions. Arrangements were in place to ensure the person's rights were protected.
- The registered manager and staff were able to discuss how they supported people in making decisions. Care records identified how each person communicated their needs and choices.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

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

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 received care and support from a kind and compassionate staff team. All those spoken with said they liked the staff and that staff were good to them. One person said, "I like all the staff"; another said, "Staff are all lovely and I can speak with them if any worries".
- The registered manager and staff supported people to express their sexuality safely. Where one person was vulnerable, the registered manager had spent time with them to support them and give advice about how to stay safe.
- It was evident that good relationships had been developed between people using the service and staff. At lunchtime, staff sat with people in the garden; chatting and laughing and talking about their plans for the afternoon.
- A relative told us, "It is a home from home. (Person) gets great care and attention here... We have entrusted our child to them and can only praise them."

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

- People were encouraged to express their views about the service. Easy read annual satisfaction surveys were completed and showed a high level of satisfaction with all aspects of the service.
- Staff demonstrated a passion for understanding people's needs and choices. They said their job was to ensure people had lives as fulfilled, independent and happy as possible.
- A professional said, "I get the sense people were very well supported with independence there. They want to do the best for everyone."
- Staff were aware of people's preferred communication methods, which helped to ensure people had a say in how the service was provided.
- People's care plans were written in a person-centred way, describing their individual preferences and goals.

Respecting and promoting people's privacy, dignity and independence

- Care and support was delivered in private and in the most discreet way possible.
- If people had a preference regarding the gender of staff assisting with their personal care, this was respected.
- People were supported to develop and maintain daily living skills. For example, some people helped on

the farm. One person was particularly proud to be in charge of looking after the hens. Other people were supported to develop their cooking and baking skills. One person said, "I enjoy baking with the staff".

- A relative said, "There are no unnecessary restrictions here. (Person) is supported to do as he wants".

Is the service responsive?

Our findings

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

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

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 were happy with the support they received. One person said, "The staff help me. I get upset and they help". A relative commented, "(Person) is happy and settled here" and a professional said, "They (staff) are keen to get things right for people there".
- People received personalised care that was responsive to their needs. They were supported by a regular staff team who knew them well.
- The provider was moving care records from a paper form to an electronic format. Not all information about people's individual needs and preferences had been transferred to the new electronic records, so both sets of records were in use.
- Relevant care plans were in place for each person, including how to manage certain health conditions. Care plans had been created with the people receiving support and (if appropriate) their relatives.
- People had an 'essential information' document for use if transferring to hospital or another services. The aim of this document was to provide hospital staff or others with important information about them and their health.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs, and preferences were recorded. Staff were aware of people's communication methods. We saw people expressed their needs and preferences and these were met by the staff team.
- Pictorial weekly activity boards were used with some people to help them understand what was planned for the week. One person had a pictorial reminder of which staff were supporting them daily. One person liked to receive the staffing rota by email and the registered manager was ensuring this happened.
- Important information was presented in an easy read pictorial format to help people understand their rights and responsibilities. For example, tenancy agreements, the complaints procedure and care planning documents.

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 were supported to take part in their chosen activities. Each person had a weekly activity plan which staff supported them with.
- People described the variety of activities they were supported to enjoy. This included, horse riding; swimming; going to the gym; attending the day centre and working on the farm.
- People accessed the local community regularly. They attended various village events, such as beer and music festivals; scare crow competitions and a local art class.
- Important relationships were recognised and supported. People were supported to keep in touch with family and friends. One person was supported to write regularly to a family member.

Improving care quality in response to complaints or concerns

- No complaints had been received by the service since the last inspection. No complaints or concern had been received by the Care Quality Commission about the service.
- People using the service said they would speak with the registered manager (who they knew by name) or staff, if they had any concerns or worries.
- There was a clear complaints procedure, which was available in an easy format for people using the service. A relative said they had no cause to complain but if they raised an issue or made a suggestion this was listened to and acted on.

End of life care and support

- No-one was receiving end of life care at the time of the inspection.
- The registered manager explained the service had supported several people for many years and knew them well. They said they would like to be able to support people at the end of life if necessary and would enlist the help and support of the community nurses.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

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

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 led by example to create a happy and caring environment. The registered manager was visible and well known to the people using the service. During the inspection people visited the office to chat about their plans for the day. Interactions were genuinely warm and friendly, and people obviously felt comfortable and able to speak freely to the registered manager.
- People were fully involved in decisions in relation to their care and support and told us they were very happy with the service. Staff were familiar with people's preferences and how they wished their care to be delivered.
- To increase people's participation, the new electronic record system had a function to capture people's feedback verbally about how their day had been. This meant daily notes were reflective of people's own experience.
- A relative and professionals said the service was well managed. Comments included, "The service is very well managed. In all the years (person) has been here we have not had any concerns. Lucky to have found this place".
- Staff understood the ethos of the service and worked to promote people's rights and independence. One explained their role was to, "...help them lead an individual independent life, choosing what they do day to day".

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; Continuous learning and improving care

- The registered manager understood the requirements of duty of candour. They acted in an open and transparent way. They were aware of the need to notify the Care Quality Commission and others about any incident that had caused, or placed, a person at risk of harm.
- A relative and professionals expressed their confidence in the registered manager. Comments included, "We have no concerns only praise" and "They work in an open and inclusive way. Always open to our suggestions...with people's best interests at heart."
- The registered manager maintained a good level of oversight in relation to development of the service. Internal review systems were in place to monitor trends, identify risk and ensure people's safety was not compromised.
- The registered manager had recently completed a local authority leadership course, which had resulted in

improvements to the service. For example, improvements had been made to the website and use of social media. Contact had been made with additional trainers to enhance the training provided to staff. Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager worked alongside staff daily. This supported staff by demonstrating good practice, leading by example and enabling them to raise any day to day concerns or ideas for improvements
- Staff said they were well supported by the registered manager, who they described as approachable and always willing to listen. They were clear about the purpose and ethos of the service.
- The staff team described high morale, with a team which worked together for the benefit of the people they supported. This was confirmed by the positive feedback we received from people using the service, relatives and professionals.

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

- People, their relatives and staff were encouraged to have an influence on how the service was delivered. For example, people had packages of care which were bespoke to them and delivered in a way and at a time which suited them and was mindful of protected characteristics.
- Annual satisfaction surveys from people using the service and relatives were positive. Surveys for people using the service were in an easy read pictorial format, enabling people to provide feedback in a meaningful way. Where people had identified things, they would like to do or learn, these were acted upon. For example, one person wanted to use the bus more and was supported to do this. Another person wanted to learn how to use their tablet and staff supported them with this.
- Comments from relatives' surveys included, "The levels of skills are very impressive"; "We feel that Culmside is improving all the time and facilities and amenities are excellent" and "The unit at Culmside is very very good..."
- Results from professional surveys were equally positive. Comments included, "Very impressed with the pre-visit discussion and preparation"; "This is a great place and they provide an excellent service..." and "Culmside seems really positive, friendly and committed to giving a good service and the wellbeing of their service users".

Working in partnership with others

- People benefited from a service that worked in partnership with families and key organisations, including the local authority and health and social care professionals.
- Health and social care professionals described a pro-active culture within the service which advocated for the people they supported. One professional said, "They have a measured and thoughtful approach regarding any changes or issues; they sensibly get on with things".