

Select Lifestyles Limited

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Inspection report

Select House
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12 May 2021
13 May 2021
14 May 2021

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18 June 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Select Lifestyles provides personal care to people who may have a Learning Disability and Autism living within supported living schemes. At the time of the inspection, there were 61 people receiving personal care from the service. 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

People were supported by staff who knew how to keep them safe and report concerns of abuse. Risk assessments had been completed to highlight risks to people's safety and how these risks can be addressed. Staff knew people and the risks to their safety.

People were provided with their medicines in a safe way. There were effective systems in place to reduce the risks associated with COVID-19. There were systems in place to ensure people received their support at the times they needed this.

There were improved systems in place to monitor the quality of the care provided. People and their relatives were provided with opportunity to feedback on their experience of care. People, relatives and staff all spoke positively about the management of the service and felt the service was well led.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. People were involved in the planning of their care and accessed support that met their individual interests and hobbies. People's independence was encouraged and we saw people preparing their own meals and going out independently where able. The managers at the service and staff all described their priority as being to deliver person centred care, that met people's individual needs. This was reflected within care records and conversations with staff who demonstrated extensive knowledge of people's lives, interests and what mattered to them.

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

Rating at last inspection and update

The last rating for this service was requires improvement (Report published 16 January 2020)

The provider completed an action plan after the last inspection to show what they would do and by when to

improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

The inspection was prompted in part due to concerns received about how people's finances were managed and potential financial abuse. A decision was made for us to inspect and examine those risks. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the Safe sections of this full report.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Select Lifestyles Limited

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 completed by one inspector 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 14 '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.

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 24 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 12 May 2021 and ended on 18 May 2021. We visited the office location on 12 May 2021. We visited two of the supported living schemes on 13 and 14 May 2021.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to

send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with 11 people who used the service and five relatives about their experience of the care provided. We spoke with four members of staff as well as the registered manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

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 continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Learning lessons when things go wrong

- Prior to the inspection, we had been made aware of allegations of financial abuse. Although this was still being investigated, the registered manager had implemented systems to reduce the risk in future and ensure close monitoring of people's finances. There were weekly checks of people's money by managers which were then escalated to the registered manager for review. In addition, the providers own finance team were completing checks on how finances were managed. This had been effective with the audits showing that all money recently audited had been accounted for.
- One person told us, "Staff have been looking after my money and keeping it safe." Staff were also able to explain the actions they were taking to ensure the safety of people's money. One staff member said, "All money is locked away and we request access. We check the balance against the sheet before taking any money. We then provide receipts and record all spending when we come back."

Assessing risk, safety monitoring and management

At the last inspection, the provider was found to be in breach of Regulation 12 as risk assessments were not up to date and did not outline the risks to people's safety. At this inspection, we found that improvements had been made in risk assessments and the provider was no longer in breach of regulation 12.

- Risk assessments had been completed that highlighted any risks to people's safety and how staff should support people to reduce this risk. For example, some people had a diagnosis of Epilepsy. Each person with this diagnosis had a care plan and risk assessment in place highlighting how any seizures may be displayed, and the actions staff needed to take during a seizure to ensure the person's safety.
- Staff spoken with knew the people they supported well and could give detailed explanations of the individual risks posed to people and how they supported them to remain safe. For example, where one person was at risk of developing pressure areas on their skin, staff explained these risks and how they supported the person to reposition and reduce risk.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with staff. One person said, "They [staff] are there when you want them so I feel safe."
- Staff understood their responsibility to report any concerns of abuse. Staff had received training in safeguarding and could confidently explain who they would escalate concerns too. The provider had shared any concerns with the relevant external agencies where required to keep people safe.

Staffing and recruitment

- People were satisfied they always had access to staff support when they needed this. One person told us, "There is always staff here." Staff confirmed there were enough staff on each shift to meet people's care needs and support them with other recreational activities. In the two supported living settings visited, we saw there were enough staff to support people.
- Staff had been recruited safely. Staff told us and records showed that pre-employment checks had been completed to ensure staff were suitable to work with people in their own homes. This included a disclosure and barring service (DBS) check and the obtaining of references from previous employers.

Using medicines safely

- People were happy with the support they received with their medicines. One person explained, "They [staff] bring my medication and stay with me until I have taken it."
- Staff had been trained in the administration of medicines and could explain how they support people to take their medicines safely.
- Where people had medicines on an 'as and when required' basis, there was guidance available informing staff of when these should be given. This ensured consistency in the administration of these medicines.

Preventing and controlling infection

- In the supported living settings, we saw that on arrival any visitors were screened prior to entering the service. This included checking temperatures and asking visitors to complete a Lateral Flow Test prior to entry. Staff were seen to be wearing PPE to reduce the risk of COVID-19 transmission.
- The provider had risk assessed the risk of COVID-19. They had implemented actions including regular testing for staff, supporting social distancing in offices, and encouraging staff vaccinations.

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 Requires Improvement. At this inspection this key question has improved to 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

At the last inspection the provider was found to be in breach of Regulation 17 as the systems in place to monitor quality had been ineffective. At this inspection, we found improvements had been made and the provider was no longer in breach of Regulation 17. However, further work was required to ensure actions taken in response to audits were clearly recorded.

- The registered manager had implemented a number of quality assurance audits. These were completed by managers of each supported living scheme, with additional checks completed by area managers and the registered manager. The audits looked at areas including medicines, finances and health and safety. Where areas for improvement were identified, records showed these had been acted upon.
- Some audits however, had not recorded the actions taken. We raised this with the registered manager who had already sourced training in quality assurance for managers to improve work in this area. Immediately following the inspection, the registered manager spoke to the managers involved in the audits to remind them of the importance of accurate recording.

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

- People and their relatives spoke positively about the management of the service. One relative told us, "The new manager is brilliant." A person said, "It is like being in one big family." All the people spoken with said they would recommend the service to others based on their experiences.
- Staff told us they felt supported in their role and could approach the management team at any time. One member of staff told us, "I do feel supported. I can go to them about anything, any worries any help I need. They are all really good. I am never on my own."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager understood the duty of candour and had shared concerns or incidents with the relevant external agencies as required. Relatives spoken too also confirmed that the management team would keep in touch with them if issues arise. One relative said, "They [managers] phone anytime there has been a problem."

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

- People and their relatives were given opportunity to feedback on their experience of the service. One person confirmed, "They do sit with me and ask if I am ok with everything." Relatives confirmed they had previously been given questionnaires to provide feedback.
- Prior to the COVID-19 outbreak, the provider had established a 'client council' where each supported living scheme appointed an ambassador for the service who would attend regular meetings with the provider at their head office to discuss the care they receive. There are plans to restart the client council now that COVID-19 restrictions are easing. At one of these council meetings, it was fed back to the provider that people wanted to hold their own disco event. In response, the provider arranged for an exclusive event in a local nightclub.

Continuous learning and improving care/ Working in partnership with others

- The registered manager was committed to learning and improving the quality of care provided. To do this a set of learning opportunities had been developed for managers that covered areas including care plans and reviews, audits and improving people's welfare through effective communication and involvement. These sessions were planned for the coming months and all managers were attending.
- The registered manager gave examples of how they had worked with other partners to improve people's experience of care. For example, the service supported one person who had a fear of the GP. The service worked alongside learning disability nurses to improve the person's confidence and this has had a positive impact on the person, who is now working up to a GP visit.