

Free Spirit Support Services Ltd Free Spirit Support Service

Inspection report

Suite 1 Retford Enterprise Centre, Randall Way Retford Nottinghamshire DN22 7GR Date of inspection visit: 28 January 2016

Date of publication: 25 May 2016

Tel: 01777712601

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

This announced inspection was carried out on 28 January 2016. Free Spirit Support Service is a small domiciliary care service which provides support and personal care to adults living in towns and villages in north Nottinghamshire. On the day of the inspection there were 10 people using the service who received personal care.

The service had a registered manager in place at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People were supported by staff who understood the risks people could face and knew how to make people feel safe. People were encouraged to be independent with as little restriction as possible.

People knew the staff who supported them and they worked well together as a team. People received a flexible service that suited their individual circumstances. People who were supported to take their medicines received support to do so when this was needed.

People were provided with the care and support they wanted by staff who were trained and supported to do so. People's human right to make decisions for themselves was respected and they provided consent to their care when needed.

People were supported by care workers who understood their health conditions and ensured they had sufficient to eat and drink to maintain their wellbeing.

People were treated with respect by staff who demonstrated compassion and understanding. People were involved in determining their care and support and were treated in the way they wished to be.

People were able to influence the way their care and support was delivered and they could rely on this being provided as they wished. People felt they would be able to express any issues of concerns and that these would be acted upon.

People who used the service and staff were able to express their views about the service. There was a motivated staff team who felt supported by the management of the service.

We always ask the following five questions of services. Is the service safe? Good The service was safe. People felt safe using the service because staff looked for any potential risk of abuse or harm and knew what to do if they had any concerns. People were supported by a sufficient number of staff who worked together well and were flexible in order to meet people's needs. Where people needed any support with their medicines this was provided to them. Is the service effective? Good The service was effective. People were supported by an enthusiastic staff team who were suitably trained and supported to meet their varying needs. People's rights to give consent and make decisions for themselves were encouraged. People were supported to maintain their health and have sufficient to eat and drink. Good (Is the service caring? The service was caring. People were supported by staff who respected them as individuals People were involved in shaping the care and support they received which they could change if they wanted. People were shown respect and courtesy by staff visiting them in their homes in a way that suited them.

The five questions we ask about services and what we found

Is the service responsive?

The service was responsive.

People were involved in planning their care and support and this was delivered in the way they wished.

People felt they were able to have any discussions they wanted and this would include raising any concerns if they had any.

Is the service well-led?

The service was well led.

People used a service which was well managed and provided staff with encouragement and support to carry out their duties

People were able to comment on their experiences using the service and there were systems in place to monitor the quality of the service people received.

Good





Free Spirit Support Service

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.'

This inspection took place on 28 January 2016 and was announced. The provider was given 24 hours' notice because the location was a domiciliary care agency and we wanted to ensure there was someone free to assist us with the inspection. The inspection was carried out by one inspector.

Prior to our inspection we reviewed information we held about the service. This included previous inspection reports, information received and statutory notifications. A notification is information about important events which the provider is required to send us by law. We contacted the local authority who commission services and fund the care for some people who use the service and asked them for their views.

During the inspection we spoke with three people who used the service and two relatives. We also spoke with three personal assistants, the team leader and the registered manager.

We considered information contained in some of the records held at the service. This included the care records for four people, staff training records, two staff recruitment files and other records kept by the registered manager as part of their management and auditing of the service.

Our findings

People felt safe using the service and were treated well by the staff who visited them. One person who used the service told us, "I am pretty safe, I won't have anyone in the house that shouldn't be here." Another person told us, "Yes I do feel safe with them (personal assistants)." The team leader said, "We make our clients feel safe with us."

Personal assistants were able to describe the different types of abuse and harm people could face, and how these could occur. One of the personal assistants we spoke with told us, "We can tell if anyone is feeling any different, we make sure they have not been abused. We make sure people are safe in their homes." The team leader said they were vigilant to keep an eye out for any unwanted callers in the areas who may try to exploit people. They said people were always at risk of abuse and they needed to be alert to that. The team leader also said staff wore a non-descript uniform so they would not identify people were receiving a service from them.

Staff said although they had not needed to, if the situation arose they would raise any concerns or worries they had about people's safety with the registered manager. Staff said they had completed training on recognising and reporting any abuse as part of the safeguarding training they had received.

The registered manager said they had not made any referrals about people's safety to the local authority, but knew how to do so if they needed to. We saw contact details for the Multi Agency Safeguarding Hub (known as MASH) where any safeguarding concerns should be reported were displayed in the office.

People received their care and support in a way that had been assessed for them to receive this safely. People told us there had been an assessment carried out at their home to ensure they could be provided with the care they needed in safety. They also told us when any equipment was needed this was provided. A person who used the service told us, "Yes they checked everything was okay." A relative told us, "They (personal assistants) always use the equipment, it's the way to help them safely." They also told us there were always two personal assistants present to support their relation as, "It needs two carers to do it correctly."

Personal assistants said people's properties were always assessed when making up the care packages. They also said any equipment they needed was in place before they started the care package. The team leader told us they would help anyone get the equipment needed, but they would not start the care package until they could do so safely. The team leader told us how they had identified one person's needs had changed. This had meant the person now needed a different piece of equipment to support them safely. They told us how they had sorted this out that day so they could support the person safely at their evening call. Personal assistants said they always had the correct number of staff present before providing any care and support.

Personal assistants were aware of their responsibility to check on people's overall safety. They spoke of ensuring people's homes were left secure at the end of their visit. Any risks to people were highlighted through the use of risk assessments, which identified good practices to promote and keep people safe. We

saw risk assessments were in people's care files. These included risks of falling and lack of nutrition and hydration.

There were sufficient staff employed to provide people with consistent care and support which met their needs. People told us they had a group of regular personal assistants visit them. One person who used the service told us, "I won't have different carers, they know that this is important for me." Another person said staff visited them, "In rotation, I always have ones I know."

The registered manager said they would only take on new clients when they had the staff availability to provide the care package the person wanted. Feedback we received from other professionals included a comment that it was a strength of the service that they did not take on any new people if they did not have the capacity to do so. A personal assistant told us, "We are a small company, we have the same (work) runs and see the same people." Another personal assistant said, "We go out to meet any new clients with the team leader." The team leader said, "We provide continuity of workers. All changes of workers are introduced before starting care." We saw some recent rotas which showed people were visited by the same personal assistants each week and there were sufficient staff to ensure all the visits were covered.

People received the service at the time it was planned because there were sufficient staff employed and sufficient travelling time allowed. A person who used the service said staff were, "Always on time, they are very good for that. They never let us down I rely on that." The team leader said, "Staff are punctual, the time of arrival is recorded and clients would tell me if anyone is late." Personal assistants said they had sufficient staff to provide the service people needed. A personal assistant told us, "If people pay for a service they should get that service."

People were supported by staff who had been through the required recruitment checks to preclude anyone who had previously been found to be unfit to provide care and support. These included acquiring references to show the applicants suitability for this type of work, and whether they had been deemed unsuitable by the Disclosure and Barring Service (DBS). The DBS provides information about an individual's suitability to work with people to assist employers in making safer recruitment decisions. Staff recruitment files showed the required recruitment checks had been carried out. Personal assistants felt the recruitment process recruited caring staff suitable for the work they were required to do.

Most people did not need any support with their medicines, but any support that was needed was provided. A person who used the service told us, "They put in my eye drops they are more skilled than I am, I asked them to do that."

The team leader said they would prompt anyone who needed reminding to take their medicines, but said most people were able to do this themselves or had a relation who helped them. Personal assistants said they did not have much involvement in people's medicines but they had been trained in how to support people safely if needed. There was a consent form to use when people were assisted with their medicines to show they had agreed to that support.

Is the service effective?

Our findings

People were cared for and supported by staff who had the skills and knowledge to meet their needs. People told us staff understood their needs so they thought they must have been trained well. A person who used the service told us, "They are all very good at their job."

People were supported by personal assistants who received training, guidance and direction in formal and informal settings. The team leader said they regularly worked with all the personal assistants and observed their practice. A personal assistant told us, "We get support through training and supervision. We go on quite a few courses." Some personal assistants said they had enjoyed a recent course they attended on continence management. Personal assistants also said they were a strong team and provided support and guidance to each other.

The registered manager told us some personal assistants had not been getting on well with the new care certificate. The registered manager said they had organised this into group learning sessions, rather than staff working individually, which had seemed to make a positive difference. The care certificate is a recently introduced nationally recognised qualification designed to provide health and social care staff with the knowledge and skills they need to provide safe, compassionate care.

People had their rights to give their consent and make decisions for themselves promoted and respected. A person who used the service told us, "They showed it (my care plan) to me and I signed it. I felt in control." Personal assistants told us they always asked people before providing any support, who then told them what they wanted. Staff told us they only passed information on to relatives if the person who used the service agreed that they could. They also told us people had signed copies of their care plans in their homes to show they had consented to their care package.

We saw the provider had various consent forms to use depending on people's circumstances. These included an authorisation form to discuss their care with named other professionals and other relevant people, such as their relatives. People who used the service had signed the terms of conditions with the agency.

The team leader told us all the people who used the service were able to make any decisions for themselves. They said they would be able to follow the Mental Capacity Act 2005 and complete an assessment to determine if a person was able to make a decision for themselves.

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 were provided with support to ensure they had enough to eat and drink to maintain their health and

wellbeing. A person who used the service told us, "They will help me with support and encouragement with eating. They know the way round my kitchen and where things are kept." Another person said, "I am left a meal (by my family) they (personal assistants) will heat it up and serve it very nicely."

Personal assistants said a lot of people had ordered high nutritional ready meals which they heated up. They said they offered other people a choice from what was available in the fridge and cupboards. They said they made a record of what people had to eat and drink whilst they were with them. The team leader said they always made people a cup of tea when they arrived and carried out visual checks to see what they had eaten. They said they checked to see if there was food available and would inform people's family members if there was food needed.

Personal assistants said they had received basic food hygiene training and described good practices they followed to ensure food was kept in good condition. They told us they asked people if they could dispose of any food that had passed the use by date.

People's healthcare needs were known and supported. A person who used the service said, "If I'm not well they will stay on till the next person comes, they always have someone they can call on." A relative said they told staff what needed to be done following a doctor's visit and they followed these instructions.

Personal assistants said they were aware of people's health conditions and what was good for them. The team leader said they understood the health conditions of people they visited and knew the signs and symptoms to look for. They said there was information put into people's care file about their health and some details of the health condition. We saw information about a person's health condition in one of the care files we viewed.

Our findings

People had formed relationships with staff who were friendly, sensitive and caring. A person who used the service told us, "They communicate with me well, they are very good at that." Another person told us, "We get to know them (personal assistants) quite well, we are friendly." A relative said they had been told by a personal assistant, "I know your [relation] is the service user but you're important too." Another relative said, "We are very fortunate to have these (staff) they are well thought of in the area. We consider ourselves fortunate to be with them."

Personal assistants described how they tried to engage with people and build up their trust. They said they made sure that when they were speaking with people they positioned themselves where the person could see them clearly, and be able to lip read if that helped them. They also said they used hand signals to demonstrate or emphasise certain points.

Personal assistants said they treated people equally but individually. One personal assistant said, "Everyone has differences." The team leader said, "Showing respect is an everyday thing, everyone is different." They also said, "We build working relationships with trust by being professional." The registered manager told us they respected people's diversity and individuality. Feedback we received from other professionals included a comment that staff looked at people as a whole and not just their personal care needs.

People were cared for and supported by staff who wanted to provide the best service they could. A relative told us staff worked hard and enjoyed their work. They said, "There is no laid back approach, they know what to do from their worksheet and how that should be accomplished." Another relative said staff were, "Generally friendly but thoughtful in approach." Staff said they built a rapport with people and had a friendly relationship. One personal assistant said, "We have a good laugh and joke together." Another personal assistant said, "You can't do this job if you don't care." The team leader said "I love my work, if I stopped enjoying it I would pack it in."

People were involved in planning their care and support and making decisions about this. People said they were able to express their views on their care. A person who used the service said, "We discuss my care." Another person told us, "I am asked what I think or want." Staff spoke of involving people and their relatives in discussions about their care and any changes needed. Staff said that people could read their care files if they wanted to.

People who used the service said they felt they were treated with respect. One person said they were, "Very much so, (staff are) friendly, but they respect our lifestyle." The team leader said, "We treat people's homes with dignity and respect. It is their beliefs and we remember we are visiting their home, it is not a place of work." The registered manager told us they always explained to people what they would be able to do so they could decide if this was the service for them.

Personal assistants said they discussed things with people they were interested in. The team leader said people often wanted to know a bit about them and their life and liked to talk about things they had done or

liked to do. The team leader told us they encouraged people to regain or maintain their independence. They said, "We do things together with them rather than for them. It's important to use it or they will lose it."

Is the service responsive?

Our findings

People had their needs assessed so plans could be made on how to provide them with the care and support they needed. A person who used the service told us, "We did it (completed an assessment) together." A relative told us, "I told them what we needed." A personal assistant said, "The team leader or manager prepares the plan with the client, it is what they want."

Personal assistants said people gave them more information as they got to know each other, which they fed back to the registered manager or team leader. Personal assistants said they made a record of how people had been and what had taken place during each visit in their care file. We read a sample of these records and saw they described what had happened during the visit and how the person had been.

People's care was kept under review and changed when there was a change of circumstances. A relative told us, "The care plan is updated every week and immediately when needed. Last week we had a change and it was made straight away." A person who used the service told us they were involved in changes to their care plans through a review and said, "I've got one coming up." Feedback we received from other professionals commented on how people's care plans were reviewed when needed in order to obtain positive outcomes for people.

People said they were provided with care and support in a way and at the time that suited them. They also told us their calls were for the length of time planned. One person said if they asked a staff member to do something differently, "They will say 'oh yes of course I can'." The team leader told us they could rearrange what care was provided depending on the wishes of the person who used the service. They said the care plans acted as guidance, if someone would rather do something differently they would accommodate this. A personal assistant said the care plans, "Give us guidance, but we still use our own initiative and speak to the client."

People told us staff practically always arrived on time and they were contacted on the few occasions there had been any delay. A person who used the service told us, "They are normally (on time) or have got an explanation if not. They always let me know." They also told us they never had a call missed. A relative said, "They are always on time, they are very good for that. They never let us down, I rely on that."

Care workers said they felt the visits were scheduled for the right length of time for them to be able to carry out their duties. They said they normally had enough time to sit and talk with people at the end of their visit. The team leader told us they called people if they were running late or if there had been an emergency. They told us they would be able to cover any calls in those circumstances.

People who used the service said they knew how to report any concerns or complaints, they said they just needed to ring the office. One person who used the service said, "I haven't any complaints but if I ever need to discuss anything I just call the office."

Personal assistants were all aware of the complaints procedure but said they had not had anyone who had

wanted to make a complaint. They said if anyone mentioned anything not being to their liking they would act on this straight away so they would not need to complain. The team leader said information was included in the care plans about how to make a complaint. The registered manager said there had not had any complaints made, but they would see these as a learning process to improve the service if any were made.

Our findings

People who used the service and their relatives told us they did not have any suggestions on how to improve the service, but felt that if they made any comments or suggestions these would be listened to. One person said, "No, I don't have any suggestions, they do it all very well. I think I would be listened to if I made any." A relative said, "I could (make suggestions) but have no reason to do so."

The team leader told us they had made some adjustments to the order of a run of calls at the suggestion of a person who used the service. This had meant the person got a call time when they wanted it without affecting other people's preferences.

Personal assistants said the service was well managed. They said they were able to put forward their opinions and had the support they needed to carry out their duties, such as having their rotas in good time. One personal assistant said, "This is a well led agency, I wouldn't be here if it wasn't." Feedback we received from other professionals referred to the registered manager having worked to resolve difficulties in a timely and personal way.

The registered manager said there had been a few occasions when they had been able to get some staff together to discuss issues and the day to day running of the service. The registered manager said they tried to organise full staff meetings, but this proved difficult to get enough staff together to hold regular meetings whilst maintaining the service. They told us they saw each other regularly and tended to rely a lot on regular telephone conversations, emails and text messages to communicate and discuss ideas. The registered manager said they would pass documents round the staff team to read and sign to show they had read these.

Personal assistants said they received constructive feedback about how they did their work. One personal assistant said, "It is nice to be praised, but if you don't know what needs to be improved how can you improve?" The team leader told us they ensured records kept in people's homes were correctly completed when they carried out spot checks and when they took part in people's planned calls.

The provider complied with the condition of their registration to have a registered manager in post to manage the service. We found the registered manager was clear about their responsibilities, including when they should notify us of certain events that may occur within the service. Our records showed we had been notified of events that had taken place the provider was required to notify us about.

The registered manager said they sought people's views on the service formally at care reviews and informally every time they had contact with them. The registered manager said they had sent out a service review form to people who used the service and the comments made had all been positive. They said this was something they intended to do each year.

The registered manager showed us how they oversaw the service and managed the administrative side of the business. We noted that some of these systems were not kept up to date and the registered manager

said this was an area they were looking to improve. Following the inspection the registered manager sent us an action plan detailing how they would bring and keep the administrative and monitoring systems up to date.