

## Choice Support

# Choice Support Milton Keynes

### Inspection report

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20 April 2017

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

Choice Support Milton Keynes is registered to provide personal care to people with learning disabilities and autistic spectrum disorder living in supported living accommodation. At the time of the inspection 38 people were using the service.

At the last inspection on 25 February 2015 the service was rated Good. At this inspection we found that the service remained Good.

The service had a registered manager. 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 and associated Regulations about how the service is run.

People using the service continued to receive safe care. Robust staff recruitment procedures were followed. The staffing levels met people's needs. People were protected from the risk of harm and received their prescribed medicines safely.

People using the service continued to receive effective care and had maximum choice and control of their lives. The staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People received care from staff that had the appropriate knowledge and skills to meet their needs, and they were supported to maintain good health and nutrition. Staff were provided with a thorough induction and on-going training. They had attended a variety of training to ensure they were able to provide care that was based on current practice. Staff received regular supervision and appraisal from their allocated supervisors.

People received care that respected their individuality, they were treated with kindness, compassion, dignity and empowered to be involved in making decisions about their lives. The staff respected their diversity, and knew the people who used the service well.

People and relatives, where appropriate, were involved in the planning of their care and support. Detailed personalised support plans enabled staff to provide consistent support in line with people's preferences. People knew how to raise a concern or make a complaint and the provider had effective systems in place to manage complaints.

People benefitted from using a service that had a positive, person centred ethos and an open culture. People, their relatives and staff had confidence in the registered manager's ability to provide consistent high quality managerial oversight and leadership. Established quality monitoring systems were used to drive continuous improvement.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Choice Support Milton Keynes

## **Detailed findings**

### 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 checked 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 March, 3 and 20 April 2017 and it was announced. We provided 48 hours' notice of the inspection to ensure management were available at the office to facilitate our inspection. The inspection was undertaken by one inspector.

We had asked the provider to complete a Provider Information Return (PIR), which is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. This was completed by the provider and returned on the 11 January 2017. We also looked at other information we held about the service from statutory notifications of events that the provider is required by law to submit to the Care Quality Commission (CQC).

Prior to the inspection we sent out questionnaires to people using the service, their representatives, staff and community professionals and analysed the responses received. During the inspection we visited six people living in supported living accommodation based in Milton Keynes. The people using the service had complex learning disabilities that affected their ability to communicate verbally with us, the staff and visiting relatives supported people to express their views about the service to us.

We spoke with the registered manager, one support manager, one team leader, one senior support worker, three care staff and two relatives. We reviewed the support plans, risk assessments and other associated care records for three people using the service. We also looked at three staff recruitment files and records relating to staff training and support, and the management oversight of the service.

# Is the service safe?

## Our findings

People were safe, when asked if they felt safe people responded with smiles and nods and looked relaxed with the staff. Relatives told us they were confident the staff kept their loved ones safe. One relative said, "[Name of person] has very limited communication skills, but he is able to express when he is happy or sad. We visit at different times of the day and always find him looking well; we have every faith in the staff." The staff told us they completed annual safeguarding refresher training, which included the whistleblowing procedure. This was also evidenced in the training records seen during the inspection.

Risk assessments identified and responded to areas of individual risk, whilst promoting people's rights to independence and to take risks. We saw the assessments were reviewed on a regular basis and updated to reflect people's changing needs. People and their representatives had been involved in decisions about how specific risks were to be managed.

The recruitment procedures made sure only suitable staff were employed at the service. Staff told us upon recruitment they had produced documentation to prove their eligibility to work in the United Kingdom and they were of good character. Documents reviewed at the inspection evidenced that all the necessary pre-employment checks had been carried out.

People's dependency levels were assessed and regularly reviewed and staffing arrangements met people's assessed needs. The hours allocated ensured staff were available to accompany people on outings according to their needs and preferences and to spend time socialising with people.

People's medicines were managed safely and administered at the prescribed times. The staff were knowledgeable about the way in which people preferred their medicines to be administered. Staff were provided with training on the safe handling and administration of medicine, their competency to administer medicines was regularly assessed and regular refresher medicines training was undertaken.

# Is the service effective?

## Our findings

People received care from a staff team that were knowledgeable and skilled in carrying out their roles and responsibilities. Staff told us they received induction training, on-going refresher training and training to meet the specific needs of people using the service. We saw that staff were placed on the Skills for Care, 'Care Certificate' and a programme of training was in place to ensure staff received annual update training, which was closely monitored at the service.

The staff told us they felt well supported by the registered manager and the team leaders. They told us that when they first started working at the service they had been given a full induction and assigned to a learning mentor. One member of staff said, "We work well with each other, everyone is really supportive, I have learned so much since I started working here, the support is fantastic." The staff told us they had regular supervision meetings to discuss their learning and development needs and records seen at the time of inspection evidenced the meetings took place.

The staff were aware of their responsibilities in relation to the Mental Capacity Act 2005 (MCA) Some people required supportive boundaries to be in place to enable them to reside alongside other people with complex learning disabilities. All staff received training on positive behaviour support and staff interventions followed the best practice guidance. Relatives confirmed they had been fully involved in making best interests' decisions on behalf of their loved ones, and they attended review meetings to ensure the decisions remained relevant to the person's current situation.

People were supported to eat a healthy diet. The staff supported people to plan their meals and assist people with shopping for groceries. Detailed guidance was available within the support plans for people with food allergies and other dietary needs. For example, people with swallowing difficulties, and people requiring their nutrition and hydration to be received through a Percutaneous Endoscopic Gastrostomy (PEG) feeding tube (used where people cannot maintain adequate nutrition with oral intake). The staff were very knowledgeable of the different levels of support people needed to eat and drink and accommodated their needs. They worked closely with healthcare professionals and guidance and advice from the healthcare professionals was incorporated within the support plans.

## Is the service caring?

### Our findings

People were treated with kindness, compassion, dignity and respect. We observed good interactions between people using the service; the atmosphere was light hearted with laughter and good humour. The staff were very astute in responding to the non-verbal communication used by people, such as gestures and sounds. It was evident that people felt comfortable with the staff and had good relationships with them. Relatives told us they always found the staff to be warm, caring and friendly. One relative said, "The staff are very good at recognising when [Name of person] is not his usual self, they always keep us informed." Another relative said, "I can't speak highly enough of them; they are very friendly, supportive and caring."

The staff were highly motivated and inspired to offer care that was kind and compassionate. Many of the staff had worked for the service for a number of years. They told us they worked well as a team in order to enable people to lead fulfilling lives.

People or their representatives were involved in planning their care. Relatives told us they were asked for feedback on the service and their comments were listened to, to continually improve the service.

Information was available on how to access advocacy services should they need to. We were told that advocate services were used by some people using the service and they had been fully involved in supporting decision making.

The staff understood the importance of maintaining confidentiality. This was reflected in the discussions we had with staff and the observations made during the inspection. Information about people using the service was kept confidential, stored securely and only accessed by people who had permission to do so.

## Is the service responsive?

### Our findings

People received personalised care and support. Comprehensive assessments had been carried out to identify people's needs and plan how they were to be met at the service. Detailed support plans had been developed with the involvement of people using the service, their relatives or representatives. The staff were able to describe in detail the care and support they provided for people.

The service had a positive, person centred ethos and open culture. Relatives told us the staff supported their loved ones to follow their interests and be part of the community. Most people had their own transport and staff facilitated people to attend social clubs, discos, day to day shopping trips, meals out and visits to see friends and family.

The service worked with people following the principles of the 'Reach' standards; these are standards that people with learning disabilities should expect from supported living services. Choice Support Milton Keynes promoted people to have the same rights and responsibilities as other citizens, such as, the right to choose where to live, who to live with, who to provide their support, to choose friends and relationships, to be part of the community and to lead a healthy and safe lifestyle.

People and their relatives knew how to make a complaint and were confident that their concerns would be listened to and addressed. One relative said, "Nothing ever reaches a complaints stage, we can speak with any member of staff and things get sorted straight away." All complaints were reviewed as part of the on-going management systems and viewed as learning opportunities to continually develop the service.



## Is the service well-led?

### Our findings

A registered manager was in place at the service. They led by example, promoting the vision and values of the service and made sure people were at the heart of the service. The relatives and staff were very positive about the care provided at the service. Relatives said they would recommend the service to others. One relative said, "We are very fortunate to have such a good service on our doorstep."

Good management and leadership was demonstrated by empowering people and their families to be involved in making decisions about their care. People and relatives were invited to give their views on the service they received, by attending meetings and completing questionnaires.

There was a positive, open and transparent culture in the service. The registered manager regularly visited people and met with relatives and staff. The comments we received from relatives and staff were very complimentary of the support they received from the registered manager.

Staff knew how to keep people safe from harm; safe risk taking were fundamental aspects of the ethos of care and support at all levels. They were encouraged to be a part of the service and contribute to its development. The staff were asked for their feedback through team meetings and surveys. The positive feedback, we received indicated the staff took pride in helping people to lead enriched and fulfilled lives. They were motivated to work to high standards and build upon their skills and knowledge through on-going training.

Quality assurance systems were in place to help drive improvements. These included a number of internal checks and audits as well as a provider audit. These helped to highlight areas where the service was performing well and the areas which required development. This helped the registered manager and provider ensure the service was as effective for people as possible.