

CSN Care Group Limited

New Directions Specialist Support Services

Inspection report

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Date of inspection visit:
12 April 2023

Date of publication:
05 June 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Requires Improvement ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

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.

About the service

New Directions Specialist Support Services is a domiciliary care agency. It provides the regulated activity 'personal care' to people with mental health needs, learning disabilities and physical disabilities living in their own homes and in supported living units. At the time of this inspection, 49 people were using 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. At the time of the inspection, the service supported 8 people who received personal care.

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

Right Support:

The approach used by the service maximised people's choice, control and independence.

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. However, improvement was needed around legal authorisations where people's freedom was restricted.

Systems were in place to monitor and ensure people received their medicines safely.

Risks in relation to people's care and welfare were thoroughly assessed. This meant staff had the right guidance to support people safely.

Staff supported people to make decisions following best practice in decision-making.

Staff enabled people to access specialist health and social care support in the community.

Right Care:

The service had enough appropriately skilled staff to meet people's needs and keep them safe.

Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and knew how to apply it.

Staff promoted equality and diversity in their support for people.

People's care and support plans reflected their range of needs and this promoted their wellbeing and independence.

Right Culture:

The service evaluated the quality of support provided to people, involving the person, their families and other professionals as appropriate. Quality assurance systems helped the staff team to monitor the service they provided and promoted ongoing learning.

Staff knew and understood people well and were responsive to their individual needs. This meant people received compassionate and empowering care that was tailored to their needs.

People and those important to them were involved in planning their care.

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 (published 30 May 2022) and there was a breach of regulation. 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

We carried out an announced comprehensive inspection of this service on 24 and 28 March 2022. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve good governance of the service.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions safe, effective and well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for New Directions Specialist Support Services on our website at www.cqc.org.uk.

Recommendations

We have made a recommendation about the requirements of the Mental Capacity Act (MCA).

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?

Requires Improvement ●

The service was not always effective.

Details are in our effective findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

New Directions Specialist Support 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

This inspection was carried out by 1 inspector and an Expert by Experience who contacted people and relatives by telephone for feedback on the care and support they received. 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 is a domiciliary care agency. It provides personal care to people living in their own houses, flats and/or specialist housing. The service also provides care and support to people living in 3 '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 was a registered manager in post.

Notice of inspection

We gave the service a short 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.

What we did before the inspection

We reviewed the provider's action plan from the last inspection and 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. 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 used all this information to plan our inspection.

During the inspection

We visited 1 of the supported living units and spoke to 3 of its residents and the staff on duty. We spoke with a total of 7 staff members including 3 care workers, a team leader, a care coordinator, an administrative assistant, and the registered manager.

We reviewed a range of records. This included care records for 4 people and multiple medicines records.

We looked at 3 staff files in relation to recruitment and supervision. We reviewed a variety of records relating to the management of the service, including policies and procedures, staff training records, audits and meeting minutes.

Following our visit to the service, we spoke with another person using the service and 4 relatives on the telephone.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse.
- Staff had training on how to recognise and report abuse and knew how to apply it. If they were concerned about someone's safety, a staff member told us they would "listen to what the person says, report straight to management and write an incident form."

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

- People lived safely and received safe care because the service assessed, monitored and managed safety well.
- Risk assessments provided clear guidance to staff and covered a range of areas in relation to people's health, care and safety. These included health conditions such as diabetes and epilepsy, anxiety, medicines and activities.
- Clear processes, involving people, staff and professionals, were in place to manage accidents and incidents. Regular discussions took place among staff around sharing lessons learned and adjusting their approach to minimising risks.

Staffing and recruitment

- The service recruited and deployed staff to meet people's needs safely.
- The service carried out checks to make sure only suitable staff were recruited. Staff files showed a completed job application form, 2 references, identification checks and a DBS check. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People and their relatives were pleased with their care workers. Comments included, "The carers are good to me, I am really happy" and "Staff are pleasant, very nice."

Using medicines safely

- Staff followed effective processes to assess and provide the support people needed to take their medicines safely.
- Information on people's medicines and the level of support they required with them were detailed in their care plans. Staff completed medicines administration charts to demonstrate each time a medicine was/was not administered.
- People who were prescribed 'when required' medicines such as painkillers and medicines for anxiety, had guidance in place to instruct staff when to administer these medicines. Some people were able to

manage/administer their own medicines, and had appropriate risk assessments in place.

- Staff were trained and assessed as competent to manage people's medicines.

Preventing and controlling infection

- The service used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them.
- Staff received training in infection control and used personal protective equipment as required.
- People could look after their own rooms and belongings, and any support they needed with it was outlined in their care plan. However, we observed some areas of one of the supported living units to appear unhygienic. We raised this with the registered manager who told us they would immediately contact the building management to report this issue, and ensure staff were more vigilant at noticing and reporting such issues.

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 our last inspection we rated this key question requires improvement. The rating for this key question has remained requires improvement. This meant the effectiveness of people's care, treatment and support did not always achieve good outcomes or was inconsistent.

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.

- The service empowered people to make their own decisions about their care and support.
- Staff knew the requirements of the MCA and how to apply it. Information around people's mental capacity, decision-making abilities and choices were clearly documented in their care plans.
- However, 1 person who was deprived of their liberty by being under close supervision did not have the appropriate authorisation in place. We raised the same issue at the last inspection but at this inspection found appropriate actions had not been taken in a timely manner.

We recommend the provider seek guidance from a reputable source in relation to the requirements of the MCA and the Court of Protection orders.

- Following the inspection, the registered manager told us this was being addressed in an upcoming meeting with the relevant authorities.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Staff undertook a full assessment of people's needs before or soon after they started using the service. The assessment covered a range of areas including people's emotional and physical health, communication, preferences, culture and religion.
- People had care plans that reflected a good understanding of their health, care and wellbeing needs. The

plans set out current needs, highlighted strategies to promote independence, and specified people's goals and aspirations.

- People told us about their ability to make choices and have control of their care, and were pleased with the care and support they received.

Staff support: induction, training, skills and experience

- Staff were supported to perform their roles as effectively as possible through a robust induction programme, training and regular supervisions and appraisals.
- The service offered refresher training to staff to make sure their knowledge and understanding of the different areas of their roles were up to date. Training areas included learning disability and autism, food hygiene, equality and diversity, first-aid, epilepsy, dementia awareness, and the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors.
- Staff told us they were given appropriate support. Comments from staff members included, "I felt so welcomed since I came" and "I get good support from the team leader and manager."

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

- Staff supported people to eat and drink as per their wishes and cultural requirements.
- People's care plans contained personalised information and guidance on their food and drink preferences, including the way they liked their meals to be prepared. The guidance emphasised people being able to choose their own meals but also contained prompts around healthy eating.

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

- Staff promoted people's health and wellbeing, and involved other agencies as appropriate. People's medical conditions and any specific support they required were documented in their care plans.
- Staff supported people to access a range of health services. A relative commented, "They take her to all her medical appointments."
- The service referred people to specialist healthcare services to ensure people received the right clinical support when needed.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed 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; Continuous learning and improving care

At our last inspection, systems for monitoring the quality of the service were not robust enough. This was a breach of regulation 17 (Good governance) of the Health and Social care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The management and staffing structures were clear and quality assurance processes were effective. Senior staff understood the regulatory and legal requirements.
- The registered manager maintained oversight of risks within the service and worked closely with the staff team to provide a safe and effective service. They told us they received adequate support from the senior management team.
- The service had been working to address the issues we found at the last inspection. The registered manager was honest about areas where improvements were needed and spoke to us about the different initiatives that had been implemented to help with making positive changes within the service.

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

- There was a culture of care in which staff truly valued and promoted people's individuality, protected their rights and supported them to lead their own lives.
- People knew who the registered manager was and spoke positively of the care and support they received. One person told us, "I like the place so much, I'd recommend it to everybody."
- Staff felt comfortable to speak up and share their views.

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

- Managers worked with people, those important to them, and staff to develop and improve the service.
- The service engaged with people in different ways to gather their views on the service. These included regular individual meetings with people in which discussions took place around several aspects of their care

and wellbeing, group meetings, and quality monitoring visits to people's homes. A relative told us, "[Person] goes to a coffee morning (internal gathering where discussions took place) on Wednesdays."

- The service apologised to people, and those important to them, when things went wrong.

Working in partnership with others

- The service worked in collaboration with other organisations such as the local authority, healthcare services and other professionals. This approach made sure people received the right support from specialist teams and created opportunities for people to develop their skills and be more independent.