

Blackburn with Darwen Borough Council

Blackburn with Darwen

Shared Lives Scheme

Inspection report

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Date of inspection visit:
07 September 2021
08 September 2021

Date of publication:
28 September 2021

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

Blackburn with Darwen Shared Lives Scheme is a shared lives scheme which provides people with long-term placements, short breaks and day care, within shared lives carers (SLCs) own homes. At the time of the inspection, a total of 36 people were receiving a service, of which 34 people were receiving support with personal care.

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 told us SLCs and staff were kind and caring. Staff and SLCs were provided with training on how to protect people from harm or discrimination and had access to safeguarding adults' procedures. Robust recruitment and assessment checks were completed before SLCs were approved to join the scheme. People were matched to suitable SLCs who fully involved them in their home and family life as much as people chose. There were enough staff and SLC to meet people's needs safely.

Staff carried out risk assessments to enable people to retain their independence and receive care with minimum risk to themselves or others. People were protected from the risks associated with the spread of infection. People's medicines were safely managed and wherever possible people were supported to administer their own medicines.

SLCs told us they were very well supported by the staff team and confirmed they received suitable training to meet the needs of people using the service. Specialist training was provided to meet people's individual needs. Staff were also provided with appropriate and relevant training.

People were supported to maintain good health and had access to healthcare services. Staff and SLCs worked with health professionals to meet people's needs. People were encouraged to maintain good nutrition and hydration.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People's needs were assessed prior to them using the service and there was a matching process to ensure the person and SLC were happy with the proposed placement.

Care and support were personalised and adapted flexibly in response to changing needs and preferences. Staff and SLCs treated people with kindness, dignity and respect and spent time getting to know them and their specific needs and wishes. Our observations during the inspection, were of positive and warm interactions between SLCs and people.

The registered manager and staff monitored the quality of the service provided to help ensure people received safe and effective care. This included seeking and responding to feedback from people and SLCs about their views on the service.

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 the Care Quality Commission (CQC) to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

- People were carefully matched with SLCs to meet their needs and lived in houses in the community. This model of care maximised people's choice, control and independence. Care and support had been developed around individual assessed needs. Staff and SLCs worked in a way which promoted people's independence.

Right care

- Care was person-centred and promoted people's dignity, privacy and human rights. People confirmed their privacy and dignity was respected. Personal profiles were person centred and covered all aspects of people's needs and preferences. Training and support for staff and SLCs ensured human rights was at the heart of the delivery of care and support.

Right culture:

- Ethos, values, attitudes and behaviours of the registered manager, staff and SLCs ensured people using the service lead confident, inclusive and empowered lives. People's diverse needs were assessed, supported and respected. People were supported to make choices and live the life they chose.

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

Rating at last inspection

This service was registered at this location on 18/04/2019. Prior to this date, the service was registered at a different location. The last rating for the service was good (published 12 April 2018).

Why we inspected

This was a planned inspection, based on the registration of the service.

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 effective?

Good 

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good 

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good 

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good 

The service was well-led.

Details are in our well-led findings below.

Blackburn with Darwen Shared Lives Scheme

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 inspector.

Service and service type

Blackburn with Darwen Shared Lives Scheme is a shared lives service, they recruit, train and support self-employed SLCs who offer accommodation and support arrangements for vulnerable adults within their own family homes in the community.

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 short notice of the inspection to enable the registered manager to seek consent from people using the service, their relatives and staff, so we could contact or visit them as part of the inspection.

Inspection activity started on 7 September 2021 and ended on 8 September 2021. We visited the office location on 7 and 8 September 2021.

What we did before the inspection

We reviewed information we had received about the service. 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. 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.

During the inspection

We visited four people using the service and two SLCs in their own home. We also spoke with a visiting relative at one of the homes and one person using the service and their SLC at the office as well as two members of staff and the registered manager. In addition, we spoke with two relatives, one SLC and two people using the service over the telephone.

We reviewed a range of records. This included three people's personal profiles and support documentation as well as one person's medication records. We also looked at two SLCs recruitment and training records and staff training records. In addition, we looked at a wide range of records relating to the management of the service including policies and procedures, significant incidents and associated learning, staff training as well as audits and quality reviews.

After the inspection

We continued to seek clarification from the provider to validate the evidence found.

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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were protected from the risk of abuse, harm or discrimination. They told us they felt safe and were happy with the care and support they received. One person told us, "I couldn't be in a better place." Relatives spoken with had no concerns about their family member. One relative commented, "I can't recommend it high enough. I have peace of mind and it's fun to visit [family member]."
- SLCs and staff received regular refresher training on safeguarding vulnerable adults. They knew how to recognise possible signs of abuse and how to report any concerns. There had been no safeguarding concerns in the last 12 months.
- There were robust processes to manage people's money which included regular checks and audits by the staff. People had a finance plan which set out their financial arrangements. Additional detail was added to one person's plan following the inspection.
- The provider had established a system to record any incidents and accidents. The information was monitored by the registered manager to check actions taken were appropriate and for any learning to share amongst the staff and SLCs.

Assessing risk, safety monitoring and management

- The provider maintained effective systems to ensure potential risks to people's safety and wellbeing had been assessed. Each person's support documentation included a series of personalised risk assessments, which had considered risks associated with their care and well-being. These provided clear information about how to manage and reduce risk as much as possible, whilst not restricting people's freedom and independence.
- The provider encouraged and promoted positive risk-taking strategies to ensure people had maximum choice and control over their lives, including those with protected equality characteristics.
- Staff carried out environmental risk assessments in SLCs' homes before they were approved. The assessments were reviewed at regular intervals to protect people's safety and welfare.
- The provider had a business continuity plan and contingency plans which described how people would continue to receive a service in the event of adverse circumstances.

Staffing and recruitment

- There were sufficient staff to support the SLCs and the people using the service. SLCs told us the staff responded promptly in the event of any concerns or queries. One SLC told us, "I get good support from the team. They always get back to me if I have a problem" and another SLC commented, "They have all been wonderful, especially during the lockdown period." The registered manager explained there was a member of staff on duty to take telephone calls.

- The provider had not employed any new staff over the last 12 months. However, in the event more staff were needed they had a comprehensive recruitment procedure.
- There were robust arrangements for the recruitment of new SLCs. The process included an application form, a thorough assessment which included home visits, references, a disclosure and barring check, a second opinion interview with a person using the service and panel approval.

Using medicines safely

- People's medicines were managed safely. Staff and SLCs had received training on the management and administration of medicines.
- Where people were supported with their medicines the SLCs completed medicines administration records which were checked by the staff at monitoring visits. Some people were supported to manage their own medicines and told us how they did this safely.
- People's medicines were regularly reviewed to ensure they continued to meet their needs.

Infection control

- Staff and SLCs received training on infection control techniques and food hygiene. They supported people to understand how to reduce the risk of infection.
- All SLCs told us they were well supported during the Covid-19 pandemic. The staff ensured they had sufficient PPE and appropriate guidance throughout.

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. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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.

- Staff and SLCs had received training and understood the relevant requirements of the MCA. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.
- The registered manager explained social workers carried out assessments of people's capacity to make decisions and carried out best interests meetings as necessary. Further to this, the registered manager agreed to add further information to people's profile information in respect to mental capacity issues.
- The social work team had made one application to the Court of Protection, which was pending at the time of our visit. One professional told us, "Staff fully understand the court of protection process and any information requested is prompt and comprehensive."

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

- Prior to using the service, people's needs were assessed by a social worker. A representative of the scheme met the person to discuss the shared lives service and to complete an initial assessment. The person completed a profile of their needs, interests and preferences. The team then looked to identify a suitable carer as part of the matching process. The person was given a profile of a potential carer which included information about the carer, their house and family. Following agreement from both parties, a programme of introductory visits was arranged to enable people and the SLC to choose if they wished to go ahead with the match. Regular feedback was sought from all involved throughout the process.

- We received positive feedback about the matching process from professionals. One professional told us, "The Shared Lives service were extremely helpful in sourcing a placement for [person]. They were professional and showed a good understanding of the person's needs."

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

- People's nutritional needs were assessed before they joined the scheme and any risks such as allergies or weight issues were identified and managed.
- The SLCs were aware of people's likes and dislikes and planned meals accordingly. People told us how much they enjoyed eating out in restaurants with their SLC's family. Where possible people were supported to develop skills in shopping and preparing and cooking meals.

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

- People's healthcare needs were monitored and managed. Details of any medical conditions were included in people's profile document.
- The registered manager explained all people had a health passport to give medical staff information about their health needs in the event they were admitted to hospital.
- Staff and SLCs had developed strong supportive relationships with other professionals and agencies to provide a flexible and effective service, which was adapted to people's needs. One professional told us, "I found the service to be very supportive with excellent communication."

Adapting service, design, decoration to meet people's needs

- People's needs were considered as part of the matching process, to ensure they could access the SLC's house, maintain their independence and visit friends and family in the local community.
- People were supported and encouraged to personalize their bedrooms within SLCs' homes.

Staff support: induction, training, skills and experience

- Staff and SLCs received sufficient support and training to meet people's needs. The SLCs completed a range of training as part of their assessment before they were approved. This training was regularly updated. They were also offered additional specialist training as appropriate to meet people's individual needs.
- Staff told us their training needs were discussed on an ongoing basis and they were encouraged to expand their knowledge and expertise. The registered manager monitored staff training to ensure all staff completed their training in a timely manner.
- Staff were provided with opportunities to discuss their individual work and development needs in both group and individual meetings. Similarly, SLCs were provided with ongoing support via monitoring visits and other forums such as coffee mornings. One SLC told us, "They treat the carers with absolute respect and I feel, I am valued."

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. 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 spoke positively and warmly about their SLCs and the support they received. Several people had lived with their SLCs for a number of years and they spoke of themselves as part of the SLC's family. One person told us, "I feel great. I have more confidence and I can chill out and relax."
- The SLCs had developed caring relationships with people using the service and had a good understanding of their needs. People took part in the SLCs family events and told us they got on well with the SLCs wider family. One person told us how much they had enjoyed recent family holidays.
- SLCs received training on equality and diversity and this was discussed as part of their assessment. The staff team were committed to ensuring people's equality and diversity needs were met through matching people to the right SLC and through the importance they placed on people being treated equally and fairly.

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

- Wherever possible, people were involved in making decisions about their care and support needs. People confirmed they had discussed and contributed to their personal profile document. This demonstrated people's views were listened to and respected. One professional working with a person using the service told us, "Feedback from the individual is that they are able to choose how they are supported, and it has provided positive enrichment for them."
- The SLCs understood people's individual likes and dislikes and accommodated these preferences. The SLCs were committed to ensuring the best possible outcomes were achieved. They spent time with people to understand their preferred methods of communication.
- People were given a booklet about their potential SLC during the matching process. This provided information in an easy read format with photographs. This helped people make decisions about their prospective new home.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected. People told us their SLCs and the scheme staff treated them with kindness, dignity, respect and consideration. We observed SLCs interact with people in a caring and sensitive manner.
- Staff and SLCs had access to policies and procedures and training about caring for people in a dignified way.
- People said their SLC encouraged them to be as independent as possible and told us about the skills they had learned. One person had moved into their own flat and was being supported to learn new skills by their SLCs. The person told us, "I couldn't have done it without them. I feel as free as a bird and it's the best

feeling."

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. This key question has been rated 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

- The scheme offered personalised care to meet people's needs and preferences. SLCs knew the people they cared for well, their background, preferences, communication styles and had a shared history of experiences. People's needs were recorded in personal profile documentation which was reviewed at regular intervals to ensure it reflected their current needs.
- People's personal profile document covered all aspects of their needs. The registered manager agreed to look at ways of including more information in the profiles.
- People spoke positively about their shared lives experience and said they had grown in confidence. We found support focused on enabling people to have choices, provide opportunities to learn skills and enjoy being a part of the local community. This reduced the risk of isolation and low self-esteem.

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.

- The provider had access to easy read information for people who benefited from this style of format. This included the provider's Shared Lives booklet and easy read guidance during the Covid-19 pandemic.
- People's communication needs were identified and recorded in their assessment and personal profile.

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 meaningful activities and to engage with the local community in line with their interests and preferences. People told us they participated in a broad range of activities including crafts, walking, shopping, cinema, attending social clubs and going to restaurants. A person also told us how much they enjoyed attending a local college and another person explained their work as a volunteer.

Improving care quality in response to complaints or concerns

- People had access to a complaints procedure. The procedure was clear in explaining how a complaint could be made and reassured people their concerns would be dealt with.
- The registered manager told us there had been no complaints in the last 12 months. If any complaints were received in the future, the issues would be considered for any learning and improvements needed.

End of life care and support

- In circumstances where people required end of life care, the registered manager explained the staff would work closely with the person, SLCs and their family as well as health and social care professionals to ensure the comfort and dignity of the person.

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. 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 scheme had a positive enabling culture focused on person centred care and achieving the best outcomes for people. One professional told us, "My overall opinion is that Shared Lives offer a fantastic service to people with additional needs by matching them with families in the community who best serve their needs."
- Staff told us they felt everyone was well supported and they all told us how much they enjoyed their work. One staff member told us, "It's a brilliant service. We are all so passionate and enthusiastic. I get job satisfaction from seeing people's happiness."
- People were supported in a sensitive and kind manner. Feedback from people was positive and evidenced they felt included and listened to. One person told us, "It's really good here and we all get on well."

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 provider promoted and encouraged candour through openness and honesty. The registered manager explained the provider was in the process of developing a duty of candour policy and procedure.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care.

- The registered manager, staff and the SLCs all understood their roles. They were aware of the procedures and policies they needed to follow and what information they needed to share with the scheme.
- The provider had established systems to monitor the quality of the service. This included regular audits and quarterly monitoring visits to the SLCs homes as well as annual visits by the registered manager. We looked at records from completed monitoring visits and noted all aspects of the service had been discussed with the SLCs. The registered manager agreed to review the current support and monitoring document to provide more evidence of the records and paperwork audited and observed.
- People, relatives, SLCs and staff spoke positively about the way the service was managed and the registered manager's leadership style. One staff member told us, "[The registered manager] is so good and approachable. We couldn't be more supported" and a SLC commented, "The service is second to none. I think it's the best thing that's ever happened."
- The registered manager had plans to promote and develop the service and used all information and feedback as learning to improve the service.

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

- People, relatives and SLC's views about the service were sought through a range of methods including visits, telephone feedback, reviews and surveys. The last satisfaction survey for people using the service was distributed in June 2021 and was still being collated at the time of the inspection.
- Staff involved and engaged people in the service and considered their equality characteristics. All people were seen privately by staff every three months or more frequently if necessary. This enabled people to express their views and discuss their experiences.

Working in partnership with others

- The provider and registered manager fostered and encouraged working in partnership with other professionals and agencies.
- The registered manager, staff and SLCs sought to ensure people experienced the best possible outcomes through following good practice guidelines. This included consultation with health and social care professionals to meet people's needs. This approach was reflected in comments received from professionals.
- The registered manager was a member of many forums and frequently attended multi-disciplinary meetings. The provider was also a member of Shared Lives Plus. This charity provided numerous resources and support for all shared lives services.