

## Natural Ability Natural Ability

#### **Inspection report**

The Beacon Beaufront Park, Anick Road Hexham NE46 4TU Date of inspection visit: 29 August 2019 10 October 2019 25 October 2019

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Good (

#### Ratings

### Overall rating for this service

Is the service safe?	Good •
Is the service effective?	Good •
Is the service caring?	Good •
Is the service responsive?	Outstanding 🗘
Is the service well-led?	Good •

### Summary of findings

#### Overall summary

#### About the service

Natural Ability is a supported living service. It provides personal care to people who live in their own homes. At the time of the inspection there were nine people using the service.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People and relatives said this was an exceptional service that really had the best interests of people at its heart. They described the support people received service as "life enhancing" and "outstanding". The exemplary values of the service promoted people's independence and meant they lived meaningful, fulfilled lives. The service ethos was to help people with a learning disability to learn skills and be included as valued members of the community.

People received a tailor-made, personalised service from friendly, supportive staff. People said they really liked the staff and enjoyed being with them. Staff knew people's needs and preferences very well. Relatives said the staff were "very caring" and made sure people had enjoyable experiences and a happy social life.

People were encouraged to make their own decisions and staff understood how people communicated their choices. Staff made sure that people were treated with dignity and respect and in a way that was free from discrimination.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People were supported to have maximum choice and control of their lives and staff assisted them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Staff received the relevant training and support to assist people in the right way with their individual lifestyles.

Staff praised the culture of the management and staff team. They were all committed to providing high quality, person-centred support for people to be able to live purposeful lives.

There had been significant improvements in the way the service was managed. The provider had addressed the previous shortfalls in managing safeguarding incidents and the overall governance of the service.

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 31 August 2018) and there were two breaches 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

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Outstanding 🟠
The service was exceptionally 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.	



# Natural Ability

### **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 This inspection was carried out by one inspector.

#### Service and service type

This service provides care and support to people living in 'supported living' houses, so that they can live as independently as possible. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager who had applied to be registered with the Care Quality Commission. Registered managers and providers are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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. We spoke with the local authority commissioning and safeguarding teams. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and contacted two other people by email for their views. We contacted seven relatives about their experience of the care provided. We spoke with five members of staff including the manager, service manager, care workers and nominated individual. We contacted 19 staff by email, including support and senior support workers, for their views.

We reviewed a range of records. This included two people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

### Is the service safe?

### Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

At the last inspection there was a breach of Regulation 13 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. People had not always been protected because the provider had not followed safeguarding processes or reported incidents to the local safeguarding authority. At this inspection improvements had been made and the provider was no longer in breach of regulation 13.

- People said they felt safe and they received safe support.
- The provider had made significant improvements to the way concerns were reported and acted on. Any incidents were now reported in the right way to make sure all steps had been taken to protect people.
- Staff had completed group training in safeguarding. They said they now had confidence in how the provider would respond to any concerns.

Assessing risk, safety monitoring and management

- People and relatives felt the service supported people to lead their own lives in a safe way. Their comments included, "We have no safety concerns but do not find that things are overly restricted either."
- Risks about daily living were assessed and included strategies to minimise risk without restricting people's independence.
- The provider made sure staff worked consistently and used safe practices to support people with their lifestyles.

#### Staffing and recruitment

At our last inspection we recommended the provider did not charge people if their agreed staffing hours were not provided. The provider had made improvements.

- People said there was "a good range of staff" to provide them with right support.
- There were enough staff employed to provide the agreed levels of care to individual people.
- The provider had strengthened recruitment processes to make sure new staff were rigorously vetted.

#### Using medicines safely

At our last inspection we recommended the provider improved its guidance for supporting people with 'when required' medicines. The provider had made improvements.

• People's medicines were managed in a safe way.

• People were supported with medicines in a way that promoted their independence where this was appropriate. For example, some people's medicines were safely stored then given to the person to take themselves.

Preventing and controlling infection

• People were supported by staff to keep their homes clean and hygienic.

• Staff understood how to prevent and control infection. They used safe practices and protective equipment to do this.

Learning lessons when things go wrong

• The provider had significantly improved its procedures for dealing with, reporting and analysing incidents.

• The management team helped staff to reflect on whether incidents could have been avoided or what could be done better in future.

### 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 requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The provider worked closely with other care professionals to make sure people's physical, emotional and social needs were fully assessed before they began to use the service.
- People were offered personalised transitional arrangements to make sure their placement was successful for them.
- Staff had clear guidance about how to support each person.
- The service applied the principles and values of Registering the Right support and other best practice guidance. These ensure that people can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

Staff support: induction, training, skills and experience

At the last inspection we recommended the provider supported staff towards suitable training and care qualifications. The provider had made improvements.

- Staff received training to carry out their roles that was relevant to the needs of people using the service.
- People and relatives said staff were good at their jobs. One person said staff worked "to the best of their ability". A relative commented, "The staff provide effective care and are competent."

• Staff had regular supervisions and an annual appraisal. Their professional development was encouraged. For example, the majority of staff had achieved a care qualification and all staff completed the Care Certificate.

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

- People were fully involved in deciding their own menus and preparing meals within their own capabilities.
- Each person purchased their own food at their own preferred grocery shops. One person had special dietary needs which they managed themselves.

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

- Staff worked closely with health care professionals to make sure people received the right support in a coordinated way.
- People were supported with any healthcare needs and to attend appointments when necessary.

#### 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.

- People's consent was sought before staff supported them.
- Records relating to people's capacity showed how any decision had been made and who was involved.

• The service involved people, relatives and relevant care professionals in any decisions made in people's best interests.

### 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 were very positive in their views about the staff. They told us they "really like the staff" who supported them.
- There were clearly excellent relationships between people and staff. There were lots of friendly conversations between them as people made plans for their day and evening. Staff were appropriately helpful and encouraging, and fully respected people's choices.
- Relatives told us the service was "extremely caring".
- Staff knew people very well and respected what was important to them.
- Care records were very personalised and detailed. Records focused on people's individual preferences and aspirations.

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

- People were fully involved in decisions about their daily lifestyle and events. They made their own decisions about their menus, activities and holidays.
- People had monthly meetings with their keyworker so they could say what their plans were for the next month. People's goals and aspirations were respected, and staff supported people to achieve these.
- The service used a 'parent participation plan' to ask parents how frequently they would like to be involved in participation meetings with the managers, for example monthly, quarterly, six monthly or annually.
- The provider had arranged for independent advocates to be involved for significant decisions where the person needed impartial support to do so.

Respecting and promoting people's privacy, dignity and independence

- People said they felt respected by the staff. Their comments included, "They treat me very well" and "They are all understanding".
- Staff spoke about people in a respectful way and care records were positive about people's abilities.
- The service promoted positive risk-taking for people to lead fulfilled lives. For example, one person travelled independently so staff always made sure they had a mobile phone with them in case of emergencies.

### 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 now improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The service was exceptional at providing a personalised, bespoke service that focused on positive life experiences for the people who used it. The ethos of the service was to support people with a learning disability to build on their strengths and aspirations, helping them to gain skills, make friends and be included as valued members of the community.
- The service was very successful at helping people to achieve greater independent living skills, and their achievements were celebrated. For example, one person was supported to complete training in health and safety and was now working as a handyperson which they were extremely proud of.
- Relatives described the positive impact of the service on people as "life enhancing in all kinds of ways" and described the incredible changes in their family member's abilities since being supported by the service. They said, "Their independence increases all the time so that they are achieving far more independence than I ever thought they would."
- Care professionals also praised the positive impact the service had on people's lives. They commented that the service had "exceeded expectations" when supporting the significant change in the well-being of one person. They said the service "reacted flexibly" and "tailored its response" to meet individual people's change in needs. For example, arranging urgent, bespoke training for staff to meet the needs of someone's sudden change in mobility to allow the person to return home from hospital.
- People were fully involved in deciding on the support they wanted and when, so that it matched their individual lifestyle. People had their own copies of their staff rota.
- Relatives described the service as "very responsive" and "prepared to try new approaches to things".

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 had superb opportunities to learn new skills and lead purposeful, fulfilled lives. People were supported to find work in various cafes and shops and were extremely proud of this.
- Since the last inspection Natural Ability had started a handyperson service in the local community. Some people had started work as handypersons with training and a wage.
- Some people worked at the provider's day farming service which provided them with a valuable chance to learn new skills. A national gardening magazine had recently asked the service to provide regular articles about their day farming successes.
- The service was exceptional at helping people to find social activities and new experiences that were relevant and meaningful to each person. For example, DJ academy sessions, football groups, drumming lessons, health centres, theatre, cinemas and various local social clubs.

• The service was extremely successful in promoting people's social inclusion in their local community. People had excellent links with local services and lived valued lives as ordinary citizens of their local area. One person proudly explained how they helped an elderly neighbour.

• People were encouraged to develop and maintain relationships. One person described how staff were really supportive at helping them to arrange date nights with their girlfriend. A relative commented, "I have been impressed by how well the team work with my family member and their house mate to deal with small issues. These are not seen as problems but as opportunities to learn about relationships."

Improving care quality in response to complaints or concerns

- Each person had very clear information about how to make a complaint in a way that was meaningful to them. The information was easy to read and included friendly photos of the management team.
- People had excellent relationships with the management team, as well as staff members. They said they would be confident in telling them if they were unhappy. They each had regular opportunities to meet with managers to discuss their feelings about the service.
- There had been no complaints although a log was kept to record any future events.

#### 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 service provided people with information in ways they could understand.
- •To help people increase their independence, staff provide visual support in the form of lists, maps and prompt sheets. They also encouraged people to audio-record any meetings they attended so they could listen back to it whenever they wanted.
- The service sought support from other professionals such as the speech and language therapy team to assist people with their communication.

End of life care and support

- Emergency care plans were put in place if people's health deteriorated.
- Parents would take responsibility for arranging their family member's end of life arrangement and the service would follow their lead in terms of preferred place of care, where this was necessary.

• The provider was trialling training courses in palliative care and bereavement for staff. The provider was also looking into what support they could give to parents in the event of a person's declining health or sudden death.

### Is the service well-led?

### Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At the last inspection there was a breach of Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This related to the provider's failure to ensure that checks of the quality and safety of the service were effective. At this inspection enough improvement had been made and the provider was no longer in breach of regulation 17.

• Since the last inspection there had been a change to the management arrangements. A senior independent supported living manager had applied to the Care Quality Commission to become the registered manager. Their application was being processed at the time of this inspection.

- Systems were in place to monitor the quality and safety of the service. This included regular audits and checks by the management team. These were reported to the board of trustees.
- The management team and staff had worked hard to improve the way the service was run. Managers and staff were clear about their roles.

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

- People and relatives said this was a high quality, person-centred service.
- Relatives commented, "It's small enough that the management team know all the people who use the service which is good" and "I always get a prompt response from the management staff when I contact them, and I find them easy to approach."
- The service focused on the best outcomes for each person so they could lead a fulfilled lifestyle.

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 management team understood their responsibilities to be open and transparent if anything went wrong.
- People and relatives said the managers were very approachable. Their comments included, "The managers and support staff are accessible, professional and respectful."

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

- People said they enjoyed catching up with the management team and had regular individual meetings with them to discuss their service.
- There were annual surveys and meetings to obtain the views of people, staff and visiting care professionals. The responses were very positive.
- Staff said they were well supported and felt valued. They were encouraged to raise comments at team and individual meetings.

Continuous learning and improving care

- People and relatives described the service as "very good" and "outstanding".
- The management team had reviewed all aspects of the service since the last inspection. There was a development plan in place for future improvements, including outcome-based care planning tools for people.
- A relative commented, "(Natural Ability) provide a great service and always seem to be looking to improve."
- During this inspection Natural Ability were winners at the 2019 North East Charity awards. People and managers were extremely proud of this achievement.

#### Working in partnership with others

- The service linked with other groups and agencies that people used, or worked for, in the community.
- The service had started to network with other groups, such as dementia alliance and mental health services, to share best practice.