

The Fremantle Trust

Bedford Supported Living Service

Inspection report

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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

Bedford Supported Living Service provides personal care and support to people with learning disabilities living in their own homes. The service is provided within four supported living housing schemes located in the town of Bedford and the surrounding area.

At the time of our inspection 46 people were using the service.

At the last inspection in June 2015, the service was rated Good.

At this inspection we found the service remained Good.

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

People using the service felt safe. There were systems in place to safeguard people from the risk of possible harm.

Personalised risk assessments were completed and updated regularly.

The service had robust recruitment procedures in place. There were sufficient staff on duty to meet the care and support needs of people in each of the housing schemes.

Staff were knowledgeable and competent in their roles and were supported by way of supervision and appraisals. These were consistently completed for all staff and were used give feedback on performance and plan future personal development.

People were supported to maintain their health and well-being and accessed the services of health professionals.

Staff were kind, helpful and maintained people's dignity throughout their care and support. Positive relationships existed between people and staff.

People were involved in planning their care and deciding in which way their care was provided. Each person had a detailed care plan which was reflective of their needs and had been reviewed at regular intervals. Staff were knowledgeable about the people they were supporting and provided personalised care.

People and staff knew who to raise concerns to and information regarding the complaints procedure was available in each housing scheme. The provider had a consistent process for receiving complaints, concerns

and compliments.

Quality assurance processes were in place. Feedback on the service was encouraged and people were provided with frequent opportunities to express their views on the care and support they received.

There was an open culture. People and staff found the registered manager supportive and approachable.

Further information is in the detailed findings below.

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.

Bedford Supported Living Service

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 was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 16 and 17 March 2017 and was announced. We provided 48 hours notice of the inspection because the location provides a service to people in their own homes. We also needed to be sure that staff would be available during the inspection and that records would be accessible.

The inspection was carried out by one inspector.

Before the inspection, we reviewed information available to us about the service such as information from the local authority, information received about the service and notifications. A notification is information about important events which the provider is required to send us by law.

During our inspection we visited three of the housing schemes and spoke with six people who used the service. We also spoke with five care workers, the acting deputy manager and the registered manager.

We looked at eight people's care records to see if they were reflective of their current needs. We reviewed four staff recruitment files, the staff duty rota and staff training records. We also looked at further records relating to the management of the service, including complaints management and quality audits, in order to review how the quality of the service was monitored and managed.

Is the service safe?

Our findings

People told us that they felt safe. One person told us, "I feel very safe in my flat and having people around." Staff told us, and records confirmed, that they had received training on safeguarding procedures. One member of staff told us, "We've all been trained in safeguarding and can always contact a senior member of staff if we have any concerns." Another member of staff told us, "I've recently completed my training and have been taken through how to complete a reporting form if I ever need to do it."

There was a current safeguarding policy and information about the safeguarding process was available to staff. All the members of staff we spoke with demonstrated a clear knowledge of their responsibilities in relation to safeguarding people.

Personalised risk assessments were in place for each person to monitor and give guidance to staff on any specific areas where people were at risk. Assessments seen included risks in relation to specific health issues and well-being, personal safety, mobility needs and managing finances independently. Records confirmed that people were involved in completing assessments and that they had been reviewed regularly.

Rotas demonstrated there was sufficient staff with varying skills on duty to provide the care and support people required. The registered manager confirmed that staffing levels were monitored and the numbers depended on the assessed needs of each person being supported and the demands within each scheme.

Staff were recruited following a robust procedure. We reviewed the recruitment files for four staff and found that all the relevant pre-employment checks including obtaining references from previous employers, checking the applicants' previous experience, and Disclosure and Barring Service (DBS) reports for all the staff had been completed.

Systems were in place to manage people's medicines safely. The service had a current medicine policy and, when assessed as required, people received appropriate support to assist them to take their medicines safely. Medicines were only administered by staff that had been trained and assessed as competent to do so.

A review of the daily records and MAR showed that staff were recording when medicines had been given. Where issues with medicines had been identified by staff they had been reported and appropriate action taken.

Is the service effective?

Our findings

People received care and support from staff who were knowledgeable and trained. One member of staff told us, "There is fantastic training following the induction here." Another member of staff told us, "We received full training through doing the Care Certificate, our induction time and then we can move on to an NVQ. We do all the mandatory training as well."

Staff training records showed that staff had completed the required training identified by the provider and further courses were available to develop their skills and knowledge. The registered manager monitored the training needs of the staff team and when refresher courses were required.

In addition to training, staff received further support in their roles from regular supervisions and appraisals. They told us that they had regular contact with senior staff and received reviews of their performance. All of the staff we spoke with expressed they could speak to the registered manager or a senior member of staff if they needed support.

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.

Staff told us that they had received training on the requirements of the MCA and understood their roles and responsibilities in ensuring that people consented to their care and how to provide support to people in making choices and decisions. Staff told us they would always seek consent from people prior to providing care and support.

People's needs in relation to food and fluids were documented in their care plan. People told us they were supported with preparing meals by the care staff, where they needed help. Staff we spoke with told us that they were aware of the different support people required in relation to their food and drink.

People were supported to maintain good health. We noted from the care records that people had accessed the services of health care professionals, such as their GP, practice nurse or community mental health services, when required.

Is the service caring?

Our findings

People told us that they were happy with the care they received and that staff were kind and helpful. One person said, "I'm happy here. They [staff] are all good to me and help me with what I want." Another person told us, "They are all kind to me."

Staff spoke positively about working at the service and the relationships that they had with people. One member of staff told us, "We have opportunities to work in all of the services, if we want, and have the chance to get to know everyone." Another member of staff said, "We are well supported to get to know people and the support they need and want."

People had comprehensive care plans which were regularly reviewed and updated. We looked at eight care plans and saw they were individualised to meet people's specific needs. Regular meetings with identified staff members (key workers) were used to seek people's views on the care and support they received and demonstrated how people were involved in ensuring their care was personalised and recorded within their care plan.

We observed that staff were respectful and treated people with privacy and dignity. We observed conversations where people were spoken to appropriately by staff and that all staff sought permission from people before entering their flat or individual room.

Staff were aware of the need to maintain confidentiality. They described the importance of not sharing information with anyone else without permission and the safe storage of records.

Is the service responsive?

Our findings

People confirmed that they were involved in planning their care. One person said, "They are always asking me what I want." A member of staff told us, "The care is really centred around the person and what they want from us. Some people have a limited ability to be completely involved in everything but we involve everyone wherever they can be or where they want to be involved."

People's care plans were comprehensive. One member of staff told us, "The care plans are thorough and contain the information we need to know to get to know people and what support they want from us and the service." Another member of staff told us, "During induction we get the opportunity to read through people's care plans to introduce us to someone and then we get to know more about them in person when we are working with them more and more." Staff told us that they were kept informed of changes in people's needs through shift handover, meetings or by reading updated care plans. Staff confirmed that a senior member of staff was always available if they had any questions or concerns regarding a person's care and support.

People using the service were aware of the complaints procedure or who to speak to if they had concerns. One person told us, "I'd speak to [Name of registered manager] or [Name of acting deputy manager] about anything. Actually, I'd speak to any of them [staff], they'd sort it out." Information for people regarding making a complaint was available in each scheme.

There was an effective system for managing feedback. We saw that where complaints had been made they were logged and the action that had been taken recorded. Where compliments were received we saw that this was also recorded and then shared with the individual staff member or team. This demonstrated how the registered manager used all feedback as opportunities to monitor and make improvements to the service.

People were also asked about their views on the service through meetings and social events. The registered manager also explained how their regular presence in each housing scheme and the additional visits to people made by senior staff ensured that they were provided with frequent opportunities to give feedback. The provider also held 'listening events' to which people, staff and relatives were invited to in order to share their opinions on the service provided.

Is the service well-led?

Our findings

There was a registered manager at the time of the inspection. Staff told us that the registered manager provided them with consistent support and guidance and was actively involved in the running of the service.

The registered manager was supported by an acting deputy manager and senior care staff in each of the housing schemes. Staff told us that they were clear of the management structure of the service and understood their roles and responsibilities.

People and staff felt the registered manager and senior staff were available if they had any concerns and felt well supported. One person told us, "There is very good support from [Name of registered manager]." A member of staff said, "There is great support here from everyone. Senior staff are always available to us and are very approachable."

Staff told us that they were provided with the opportunity to discuss their work and share information within the workplace. This was completed formally in supervision and team meetings and informally through discussions at handover or whilst on shift. Staff told us the service had an open culture and they were encouraged to discuss their work and any concerns.

There was a system for monitoring the service provided to people which included audits of care records such as care plans, risk assessments and daily visit records to ensure that all relevant documentation had been completed and kept up to date. This also included the review of medicine administration records (MAR). We saw that regular feedback was sought from people and staff and the registered manager used this to evaluate the effectiveness of the service and the level of satisfaction of both people and staff. This demonstrated how the registered manager used feedback and information from a variety of sources to drive future improvement in the service.