

Creative Support Limited

Creative Support - Leicester Service

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We carried out an announced comprehensive inspection of this service on 14 July 2016. A breach of legal requirements was found. This was because the provider had not always notified us of serious incidents involving people using the service.

After the comprehensive inspection the provider wrote to us to say what they would do to meet legal requirements in relation to the breach.

We undertook this announced focused inspection 13 October 2016 to check that they had followed their plan and to confirm that they now meet legal requirements. This report only covers our findings in relation to the requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Creative Support (Leicester) on our website at www.cqc.org.uk.

Creative Support (Leicester) provider social care services for people with learning disabilities, autistic spectrum disorders, and mental health needs. It is registered as a domiciliary care service and a supported living service.

This was an announced inspection that took place on 14 July 2016. At the time of our inspection there were 48 people using the service.

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

Since we last inspected the registered manager had promptly informed us of all changes, events and incidents affecting the people using the service. Appropriate action had been taken following each incident and, where necessary, lessons learnt. This showed the service had an open and positive culture.

Staff had had further training in incident reporting and safeguarding (protecting people who use care services from abuse). They had attended a series of training events, presentations, and workshops to ensure they understood their safeguarding responsibilities and knew how to balance people's freedom to make choices with the need to keep them safe.

Other improvements had been made to the service. The registered manager had introduced a 'positive outcome form' to support people using the service in achieving specific goals. Records showed this had proved successful with, for example, one person facilitating their own care review, and another organising a party.

A new system of audit had also been introduced for the ten houses where staff provided care and support to

people. The registered manager visited each residence every three months, checked records, and talked with those who lived and worked at the residence to get their views on the service provided.

Quality assurance questionnaires had been sent out to relatives and staff by the registered manager and ourselves. The responses received so far showed that relatives and staff were satisfied that the service was providing high-quality care.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

The service was well-led.

The provider notified us of serious incidents involving people using the service.

The service had an open and friendly culture centred on the involvement of the people using it.

The provider welcomed feedback on the service provided and made improvements where necessary.

The provider used audits to check on the quality of the service.

Good 

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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 carried out to check the provider had made improvements following our comprehensive inspection on 14 July 2016. We inspected the service against one of the five questions we ask about services: is the service well-led? This is because the service was not meeting legal requirements in relation to this question.

This inspection took place on 13 October 2016 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be in the office.

The inspection team consisted of one inspector. Before the inspection we looked at information received from local authority commissioners. Commissioners are people who work to find appropriate care and support services for people and fund the care provided.

We also reviewed the provider's statement of purpose and the notifications we had been sent. A statement of purpose is a document which includes a standard required set of information about a service. Notifications are changes, events or incidents that providers must tell us about.

We visited the services offices and spoke with the registered manager and service director.

We looked at documentation concerning the management of the service. These included policies and procedures, questionnaires reflecting the views of those using and involved with the service, records of audits undertaken by the registered manager, and the minutes of staff meetings.

Is the service well-led?

Our findings

At our previous inspection on 14 July 2016 we found the provider had failed to notify CQC 'without delay' of two serious incidents relating to two people using the service. This was a breach of Regulation 18 of the Care Quality Commission (Registration) Regulations 2009 Notification of other incidents.

Following this inspection the provider sent us an action plan. This stated that in future all incidents requiring CQC notification would be completed and forwarded to CQC without delay. Both prior to and during this inspection we found improvements had been made and we had been notified of all changes, events and incidents affecting the people using the service. This meant that where appropriate other agencies could also take action to protect people from harm.

At the inspection visit we looked at the provider's incident book where staff logged changes, events and incidents. This record showed that the registered manager had taken appropriate action each time an incident had occurred. This including notifying, as necessary, CQC, the local authority, the police, and people's families and representatives.

We discussed notifications with the registered manager and service director. They told us staff followed the provider's corporate and local incident reporting policies which we were given copies of. These gave staff clear instructions on what to do if an incident occurred that involved or affected any of the people using the service. Records showed that since our last inspection senior staff had had further training in incident reporting and incident reporting continued to be part of every staff member's induction and safeguarding training.

The registered manager and service director told us that in addition to meeting their legal responsibilities to report incidents, they saw incident reporting as a useful tool to develop practice and ensure people were supported safely. They told us all incidents were analysed and, where necessary, lessons learnt. This was an example of the service promoting an open and positive culture with the emphasis on ongoing learning and improvement.

Since we last inspected there had been further developments and improvements to the service. The registered manager had introduced a 'positive outcome form' to support people in achieving specific goals. The forms prompted people to name their goal, take steps to achieve it, and consider what went well, what could have gone better, and how the outcome had improved the person's life.

We looked at some of these forms. One person's goal had been to take part in the annual review of their care and support. They had chosen the venue and invited attendees, acquired a flip chart and marker pens, set up the room, chaired the meeting, and used symbols and pictures to contribute to discussions and answer questions. The person said they had gained the confidence to speak in meetings because of this and felt more in control of their life.

Another person's goal was to take part in table top activities. Staff had supported them to do this by putting

out a selection of activities and encouraging the person to choose one. They had provided prompts, reassurances, and drinks, and played music in the background to help the person relax, and respected their wishes when they indicated they had had enough. Other 'positive outcome forms' showed people realising their goals, for example having a party, and buying a pair of shoes. This 'positive outcome' initiative was an example of management and staff at the service providing personalised and inclusive support with a view to empowering people.

The provider and registered manager had continued to raise staff awareness about safeguarding (protecting people who use care services from abuse). Staff had attended a series of training events, presentations, and workshops to ensure they understood their safeguarding responsibilities and knew how to balance people's freedom to make choices with the need to keep them safe. This included using the provider's Code RED (Responsibility, Escalation, Duty of Care) system, a reporting procedure which staff use to report any concerns which they feel may be detrimental to a person's care or support. This approach to safeguarding will help to ensure that staff have the information, skills and knowledge they need to provide people high-quality safe care and support.

Since we last inspected the registered manager and service director had also introduced a new system of audit for the ten private houses where staff provided care and support. This consisted of a three-monthly visit to each house. The first of these had been carried out with positive results which were shared with the staff and people based there. During these visits the registered manager spent time talking with those living and working at the house to get their views on the service provided. This was an example of management taking steps to ensure the service delivered high quality care that people were satisfied with.

The registered manager had sent out a quality assurance survey to people's relatives. This was based on the type of question we ask during inspections, for example, 'Do you think the staff are caring?' This enabled people to provide feedback on all aspects of the service. The responses to this survey were still coming in when we inspected, but initial results showed a high level of satisfaction with all aspects of the service. Comments included: 'You do a wonderful job, and enable [my family member] to lead a fulfilling and happy life despite the scale and complexity of their needs.'; '[The staff are] always polite and good-natured. Calm atmosphere. Give privacy.'; and 'I don't think there's anything you can do any better'

The registered manager told us that once all the responses had been received they would analyse them and produce a 'you said – we did' poster and action plan to show relatives how their ideas and suggestions were being actioned. By doing this the registered manager aimed to show that people were listened to when they shared their views about the service.

We had also carried out a survey of staff views and the views of community professionals. We sent out 43 questionnaires to staff and 39 to community professionals and had a response rate of over 30% in both groups. This showed that 100% of respondents agreed that people using the service were safe, the service was well managed, and staff and community professionals were asked for their views about the service and listened to.

In the survey staff told us they were proud to work for this service which they thought provided excellent care and support. Comments included: 'Creative support is a great support provider and puts service users at the heart of their business.'; 'I have been very impressed by the organisations standards of compassionate care.'; and 'The staff and manager are amazing. All staff at the project have offered me support, guidance and help when needed or asked for.'

The responses to these surveys provided further evidence of a well-run service that people were satisfied

with.