

Accredo Support and Development Ltd

Accredo Support and Development Limited

Inspection report

21 Church Street
Oadby
Leicester
Leicestershire
LE2 5DB

Tel: 01162721345

Website: www.accredo.org.uk

Date of inspection visit:

29 May 2018

30 May 2018

Date of publication:

20 July 2018

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

At the last comprehensive inspection on 25 and 28 October 2015 the service was rated 'Good'.

This is the second comprehensive inspection of the service. This inspection took place on 29 and 30 May 2018 and was announced. At this inspection we rated the service overall as 'Good'.

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. It provides a service to people living with a learning disability and autistic spectrum disorder.

The service is divided into three areas; supported living, alternative day services and outreach support. This service provides care and support to people living in 10 supported living settings, so that they can live in their own home 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.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

At the time of our inspection 35 people were receiving personal care and support. A registered manager is a person who has registered with the Care Quality Commission to manage the service.

A registered manager was in post. 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.

The management and staff team continued to demonstrate an outstanding commitment to providing a caring service which put people at the heart of everything. Staff were mindful of promoting people's independence and respecting their privacy and dignity. People were supported to be actively involved in decisions about their care.

People were involved all aspects of their care. Risks to people had been assessed and managed, which took account of people's preferences, diverse needs including those in relation to a person's culture or belief. People were supported with their medicines and encouraged to take positive risks to promote their independence. People were supported to live healthier lives and were supported with their health care needs when required.

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. The provider, registered manager and staff demonstrated their understanding of the Mental Capacity Act, 2005 (MCA) and gained people's consent before providing their support.

Systems and processes were in place to safeguarding people from abuse; these covered staff recruitment practices and staff training and knowledge on safeguarding procedures. Staffing levels were kept under review to ensure people received sufficient staff support. Systems also ensured accidents and incidents were recorded and analysed and steps to improve and learn were identified.

Staff continuously provided the person-centred care and support people needed to ensure that people lived as fulfilled and enriched lives as possible. They respected people's individuality and enabled people to express their wishes and make choices for themselves about their lives and aspirations. Staff had a good understanding of people's needs and preferences to ensure they were responsive. Positive relationships had been developed and staff were committed and passionate about promoting people's independence and achieving positive outcomes for them.

People received care and support that enhanced their sense of well-being and quality of life because staff worked flexibly to enable people to have meaningful experiences and to become active members of the local community.

People, relatives and staff had opportunities to engage and be involved in the development of the service. People knew how to raise a concern or make a complaint and the provider had effective systems to manage any complaints they received.

The registered manager led and inspired the staff to deliver person centred care, which had achieved consistently outstanding outcomes for people. Systems and processes were in place to assess, monitor and improve the quality and safety of services. The service was focussed on achieving good quality outcomes for people using the service and worked in partnership with other health and social care professionals to ensure people received appropriate care.

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 remained safe.

Is the service effective?

Good ●

The service remained effective.

Is the service caring?

Good ●

The service was caring.

People were supported by kind, caring and friendly staff who promoted their wellbeing, independence and supported them to achieve their aspirations. People were supported to make decisions about how their care was provided. People were treated with dignity and respect, and staff ensured their privacy was maintained.

Is the service responsive?

Good ●

The service remained responsive.

Is the service well-led?

Good ●

The service remained well-led.

Accredo Support and Development Limited

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 checked 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 29 and 30 May 2018 and was announced. We gave the service 48 hours' notice of the inspection visit because we needed to be sure that they would be in. The inspection was carried out by one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

We reviewed the information we held about the service, which included feedback from people about the service, information of concern and notifications since our last inspection. A notification is information about important events and incidents within the service.

We used information the provider sent us in February 2018 in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

The inspection was informed by feedback from surveys completed by 11 people who used the service, a health care professional and 19 support staff. The responses and comments received were all consistently positive.

We contacted commissioners that monitored the care and treatment of people using the service and Healthwatch for their views about the service. Healthwatch is a consumer organisation that has statutory powers to ensure the voice of the consumer is strengthened and heard by those who commission, deliver and regulate health and care services.

We visited the office location to see the registered manager and office staff; and to review care records and policies and procedures. We spoke with nine staff in total. They included the registered manager, operations manager, office manager, supported living service manager and five support staff.

We spoke with a person who used the service who was involved in delivering staff induction training. We visited two people at one of the supported living accommodation. We spoke with three relatives by telephone to find out their views about the service. The expert-by-experience spoke with three people who used the service and a relative by telephone to find out their views were about the service provided.

We looked at the records relating to the care of five people, which included care plans, risk assessments and medicines. We looked at four staff recruitment records and a range of information that showed how the provider monitored the quality of service provided, which included audits, meeting minutes, surveys and a sample of policies and procedures.

Is the service safe?

Our findings

At our previous inspection, this key question was rated as 'good'. It continues to be good.

People continued to feel safe. They were confident that staff were trained and knew how to protect them from harm and abuse. One person said, "I feel safe, [staff] have never hurt me or abused me" and told us that they would tell the staff if something was to happen. Another person told us they stayed in contact with family and friends using social media. Staff had provided them with information and support about social media risks and how to stay safe when using the internet. We visited one person with the operations manager. They said, "We usually know who [staff member] is coming. If someone knocks on the door that I don't know I won't open the door."

A relative said, "I trust the staff with all my heart to keep them [my family member] safe. If I didn't think [my family member] would be safe, I wouldn't let staff in [to our home]." Another relative said, "[My family members] have absolutely amazing staff that look after them. [Staff names] did a lot of research to understand the [health] condition and talked to me about how to support [my family members] needs."

Staff were trained in safeguarding procedures and the management of actual and potential aggression (MAPA), which is a method of managing behaviours that challenge services. Staff knew what to do if they were concerned a person was at risk. A staff member said, "I'd whistle-blow or call 'safecall' if [management] took no action if I'd reported concerns." [Safecall system is operated independently to enable people who use the service, their relatives and staff to whistle blow without fear.]

The staff team knew how to report accidents or incidents and appropriate action had been taken when these occurred. Notifications had been received by the local authority and Care Quality Commission; any safeguarding investigations undertaken were completed in a timely way and action taken.

All accidents and incident were analysed to identify any trends and any lessons learned were discussed and action plans put in place to ensure similar incidents did not happen again. For example, to ensure people were supported with their medicines appropriately, all staff had updated their training in medicines management and regular checks were carried out on people's medicines records.

People received care from a highly motivated team of staff who strived to provide consistent safe care and support. Risks to people had been assessed; we saw that care plans and risk assessments were in place and reviewed regularly. Staff described to us how they supported people to stay safe, which supported what relatives had told us. Care plans had clear instructions to staff as to how many staff were needed to provide support to individuals, what equipment was needed and how best to support people who had behaviours which could be challenging.

People were encouraged and supported to take positive risks such as going out into the wider community, college using public transport. One person said, "Staff cook for me because they don't trust me with knives; they think I might chop my fingers off." They were aware of the risks and felt staff supported them

appropriately. A relative told us that the support to be provided to their family members had been had been discussed with them which helped to ensure their needs would be met safely.

The office premises were secure and well maintained. The business continuity plan in place was reviewed and provided staff with guidance to follow in the event of an emergency.

People's safety was assured because staff had received training in health and safety and infection control procedures and followed this training in practice. A relative said, "[Staff] know where the box of gloves, etc are kept." The staff team used protective clothing such as disposable gloves to prevent the spread of infection and had access to the provider's policies and procedures. This ensured people's safety.

Staff recruitment processes protected people from being cared for by unsuitable staff and there were sufficient staff to meet the needs of the people. Staff records viewed confirmed relevant checks had been carried out before staff commenced work.

A relative told us that their family member was supported by a consistent team of staff. The feedback received supported the comments we received in the surveys responses from people. The supported living service manager told us that each person had a dedicated team of staff to support them. Staff rotas viewed confirmed this and showed staff with the right skill mix met people's individual needs. This meant people's diverse needs were met by a staff team who were knowledgeable and able to deliver care safely.

People received their prescribed medicines on time. One person said, "The staff [help] do all the medication; the staff take it out of the packet and pop it in to a pot for me." The staff team were trained in the safe handling of medicines, which was supported by the medicines policies and procedures. Care plans provided staff with guidance on people's medicines, possible side effects, allergies and how they liked to take their medicines. Records we viewed confirmed that staff documented when people were supported with their medicines in a safe way.

Is the service effective?

Our findings

At our previous inspection, this key question was rated as 'good'. It continues to be good.

People's needs were assessed prior to them using the service. Assessments included people's personal preferences, their social interests, cultural and spiritual wishes, as well as physical and emotional needs. That meant the provider's policies and procedures took account of the legislation and best practice guidance.

Staff worked with people to get to know them and learn how they wished to be supported. This process helped to reduce any anxieties that the person may have and the information gathered was used to plan their care, and support them to reach their goals and aspirations. People confirmed that staff understood their needs and wishes; and provided care in line with their preferences.

People received care from staff that were knowledgeable and had received the training and support they needed. A relative said, "The staff seem to be confident in the way they are able to support [my family member]." Training information viewed confirmed that staff training was relevant to their role and equipped them with the skills they needed to support people. Staff received regular supervision and appraisal. Supervision is one way to develop consistent staff practice and ensure training is targeted to each member of staff. A staff member said "[Registered manager] and [supported living service manager] are good; they are supportive, fair and on the phone whenever needed."

People told us staff sought consent and supported them to make decisions about their care and their daily routines, preferences and how they wished to spend their time. We observed staff always asked people's permission before any action was taken. One person said, "I always go to bed after the news" and felt staff respected their wishes. Another person told us that a staff member had helped them to plan their trip to visit Disney Paris with their flat mate and staff member.

The staff team had a good understanding of service users' rights regarding choice. Staff understood people's communication needs and some staff had been trained to communicate using sign language. For example, staff had worked with a speech and language therapist (SLT) to support a person with very limited communication. A 'Communication Passport' was developed, which provided information regarding how the person expressed their wishes. This meant the person was involved in decisions made about their care because staff worked in partnership with other professionals to meet people's ongoing care and support.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act. The procedures for this in community settings are called the Deprivation of Liberty Safeguards (DoLS) and are granted by the Court of Protection.

The management and staff team had awareness of MCA and understood their responsibilities to promote people's rights and choices. Records showed appropriate assessments were carried out with people and

applications had been made to the Court of Protection where people were being deprived of their liberty in their best interests.

People were supported to maintain a healthy balanced diet. One person told us staff supported them to plan their meals, from shopping to preparing their own meals. The staff team were aware people's dietary requirements. Staff were trained to prepare meals, for instance a staff team had been trained to make chapattis (flat bread). A sample of care records we viewed confirmed that people were supported to eat meals of their choice.

People had regular access to healthcare professionals and staff were vigilant to changes in people's health. One person told us that they GP visited them and their flat mate at home, when needed. Another person said, "The staff meet me at the GP if I have an appointment."

A staff member told us that the information in people's care plans about their health conditions supported staff to enable people to live healthier lives. Records for one person included information provided by the dietitian to enable staff to prepare suitable drinks which they could swallow. We saw a person's care plan included the input from specialist nurses and guidance provided was included in their care plan to enable staff to support the person to stay well. This meant staff could recognise and respond to changes in people's health needs and prompt and appropriate referrals were made to healthcare professionals.

The staff team ensured that people's home environment and layout where care and support would be provided was suitable and documented in their care plans. Staff ensured equipment used to support people and electronic devices such as personal safety alarms were in good working order to enable and promote people's independence.

Is the service caring?

Our findings

At our previous inspection, this key question was rated as 'outstanding'. At this inspection we found the service was 'good'.

People told us that the staff team continued to be supported by kind, caring and compassionate staff team. People had high praise for the staff team. One person said, "The staff help me and are very nice, they help me with personal care, shopping and cooking my meals."

We asked people and relatives if the service could be improved. One person said, "No because I do lots of different things. I teach new staff about how to talk to someone like me; how to look after me and to get to know how to support me." Another person said, "The staff are gentle, kind and respectful of me and other people like me."

A relative said, "I would change nothing for [my family member]; the staff are really lovely people and the agency is brilliant." Another relative described how staff had learnt about their family member's medical condition and said, "With their help, the plan of care that was put in place for supporting them to do have the best possible life [my family members] can have. [Staff names] are amazing and they have gone more than just the extra mile. [My family members] are both healthy, happier and positively doing more because of the right [staff team]. We don't have that many incidents because staff recognise and know how to intervene. I am happy that [staff team] are nice, caring and kind to all of us. They have changed the lives of [my family members] and me."

The survey responses and comments we received from people, relatives and health care professionals were all consistently positive. They reflected the commitment of provider, management team and the staff team to enable and empower people to be as independent and safe as possible in their own home.

A staff survey comment stated, "I feel the service that [people] receive is exemplary. Staff show a caring nature; [people] and their well-being is their prime concern. There has been a number of changes within the care sector recently but the staff team has stayed consistent and supported both the company and [people]." This comment supported the feedback we received from the staff team. Staff spoke passionately about the people they supported and wanted to improve people's quality of life.

The staff team and management shared the same values and commitment to providing a caring service. People's achievements were recognised at the annual awards evening held in November 2017. Achievements that were celebrated ranged from developing life skills such as cooking and using community services to medals won at the Special Olympics.

Information in the PIR received in February 2018 stated that staff had been shortlisted for the annual Leicestershire Carer of the Year Award in February 2018. A person told us that they liked the staff team and had nominated a staff member for a 'special award'. During the inspection visit we were told that the staff member had won the 'Carer of the Year' award and they showed us the publication of the winners with their

award. This recognition showed that the service and staff team continued to be caring in their attitude and approach.

Staff understood the importance of promoting equality and diversity, respecting people's religious beliefs, their personal preferences and choices. People continued to find creative ways to support people to make decisions about their lives, the support they needed to achieve their goals and aspirations.

One person felt that staff had positively influenced their confidence to achieve their aspiration in amateur dramatic and performance. They said, "Staff talk to me nicely and help me a lot." They told us that staff member had initially helped them to use the public transport. As a result, they used the public transport independently to attend regular training and rehearsals to perform in a show at the Curve theatre in August 2018. They said, "I love it here, I cook my own meals, I've been on holidays and I do voluntary work [at a school and a voluntary organisation]." This person told us that they had had a manicure which they had organised for themselves. This person was confident, assured and told us that they would not have been able to achieve greater independence without the support of the staff team.

The registered manager and staff team's views were consistent with the provider's ethos of promoting person centred care. They told us that the staff team used flexible and inclusive methods to support people to express their views. We saw evidence of this during our visit and people's care plans included a section about people's communication needs and what type of support was required. For example, one person's the preferred language used which was not English and the care plan directed staff to use short clear sentences. That showed the provider was complying with the Accessible Information Standard (AIS). The AIS is a framework put in place from August 2016 making it a legal requirement for all providers of NHS and publicly funded bodies to ensure people with a disability or sensory loss can access and understand information they are given.

The guide people received about the service emphasised that they would not be discriminated against, for example, based on their race, religion and sexual orientation, etc. This gave people from all backgrounds and diverse needs a message that they would be treated with fairness and respect. Staff understood their role to promote, respect and treat people as individuals. This showed that the staff team and management enabled people to make choices without the fear of discrimination.

People's dignity and privacy was respected. A person said, "The staff knock the door and shout their name as they come in; I don't expect them to wait for me to answer the door." Another person told us, "[Staff] give me the privacy I need and they wait outside [the bathroom]" and they also told us that they received support with meeting women's health needs.

The provider ensured information about people was confidential. Staff also knew the importance of confidentiality and only shared information on a need to know basis. The registered manager had made the relevant changes to comply with General Data Protection Regulation, (GDPR) that relates to how people's personal information held by the provider is managed. A confidentiality policy was in place and a certificate that showed that the provider complied with the Data Protection Act.

Is the service responsive?

Our findings

At our previous inspection, this key question was rated as 'good'. It continues to be good.

There was a person-centred approach to everything the service offered and how the service was run. People received care which was responsive and their needs were met because they were supported by a regular staff team who knew them well. People's needs were assessed and they were involved in the planning of their care. This enabled people to understand how risks would be managed and express their preferences about how they wished to be supported.

People were at the centre of their care. Care records viewed confirmed this and showed people were involved in the review of their care. Care plans had been updated to reflect any changes to people's needs, daily routines and setting new personal goals to achieve greater independence and continued involvement with family, friends and social support. This assured people that the service could provide the care and support they needed. Staff told us they felt they could respond well to how and when people wanted to be supported. Each person was supported by a team of regular staff who knew their needs well.

People had identified their aspirations and had set individual goals about how staff were to support them. They could have access to an advocate if they felt they needed support to make decisions, or if they felt they were being discriminated against under the Equality Act, when making care and support choices.

We saw examples that showed people's independence had been promoted because of staff providing person centred care. Goals achieved had enabled people with daily living tasks, confidence and support to live healthier lives. One person said, "I use the bus to get about." This person went on to say that they were more confident to express to staff how they were feeling and felt that staff had supported them well. Other people said, "I go to church on Sunday. It is the only day I get up early. I go to the Salvation Army" and "We went to the tropical bird park and we hired a mini bus to go in." The registered manager told us that the staff team had access to transportation to enable people to go to different places and use community services including attending college courses and employment (voluntary and paid work).

Staff supported people to practice their faith and supported people to go to places of worships such as the church, mosque, gurudwara and celebrated Christmas, Eid and birthdays. Staff treated and respected people as individuals. In our conversations with staff, it was clear they knew people well and understood their individual needs. A staff member could speak in Cantonese, which was one person's first language. Another staff member said, "I learnt how to make chapattis for [person's name]."

A relative said, "Since [staff name] has been looking after them; [my family members] have had more positive behaviours. They go swimming, do a good amount of exercise and are healthier for having lost weight they needed to."

People could comment about their care and the support they received through regular tenant's meetings, reviews and surveys sent out by the provider. A sample of the tenant's meeting minutes showed that people

influenced how the service was run, support they received and showed that the management team had addressed issues, which people had raised at these meetings. A sample of compliments received about the staff and the support people received showed that people received were extremely satisfied with the way their support was provided.

People and their relatives knew who to contact if they were unhappy about the care provided and were confident that their concerns would be taken seriously and addressed. One person said, "I would talk to [manager of the supported living accommodation]." A relative told us that with the support of advocacy their family member's care plan had been updated to reflect their care needs and wishes. Another relative said, "If I had any complaints I would talk to the team leader or the manager first."

The provider had a formal complaints policy in place to manage any complaints should they be received. The service had received 11 complaints since the last inspection. These were mostly related to communication. Records showed all complaints had been handled in a transparent manner and action had been taken to improve communication. Where required people were offered advocacy support to enable people to express their concerns or make decisions about their care.

During our inspection visit we received some concerns about people's care. We shared these with the registered manager who acted promptly to address them. That showed the registered manager was responsive and used feedback to drive improvements to the service people received.

The provider had systems and policies in place about how to support people at the end of their lives. Staff and people who used the service and their relatives could access information about bereavement and counselling. Records showed people had the opportunity to express their wishes and decisions made about their end of life care. No-one was receiving end of life care at the time of our inspection.

Is the service well-led?

Our findings

At our previous inspection, this key question was rated as 'good'. It continues to be good.

The registered manager continued to provide good leadership and a clear commitment to providing a good quality service which ensured that people could fulfil their goals and ambitions and live as fulfilled and enriched life as possible.

The latest CQC inspection report and rating had been displayed at the service and on their website. This is so that people, visitors and those seeking information about the service can be informed of our judgments.

The registered manager continued to maintain their knowledge through regular training, attending external training events and conferences to enable them to mentor and support the supported living service managers.

The registered manager inspired their staff and encouraged the service manager for supported living services to lead by example. Service managers and the staff team knew people well and when needed provided the care and support to people to ensure consistency for the people. The values and aims of the service were clear. All staff, without exception, understood their roles and strived to provide the care and support people needed to live their lives to the full and as independently as they could.

The provider had a clear vision to respect individual choice and promote inclusion, rights and independence. We saw that people made choices in their everyday life, were involved in activities to develop the service and in the local and wider community. News and information bulletins were available to people and staff about new initiatives and events.

Person centred care was at the heart of everything the provider delivered. From planning people's care to the development of the service. We saw that people had meaningful enriched lives with the support they received from staff from going shopping, dining out and joining in various social events.

The provider used annual questionnaires and tenant's meetings to gather people's views. The provider welcomed feedback via a dedicated 'let us know' mailbox. Each supported living accommodation had a secure post box and a supply of 'Have your Say' cards and pens. These were checked weekly and where comments or concerns had been raised, the provider had responded to them and the actions taken had been recorded. This demonstrated that people's views were listened to and acted upon, ensuring people had a voice.

Systems were in place to ensure staff were supported and enabled to complete refresher training which had been planned. This ensured staff's knowledge and skill mix remained up to date and in line with the current best practices. Staff were recognised and valued through the 'employee of the month' scheme, which was launched in September 2017.

The provider ensured that the service kept up to date with the current best practices and innovative ways to support people through membership of relevant organisations such as Skills for Care and national organisations to support people with autism and learning disabilities. The corporate and regional newsletters regularly included updates on changes to legislation and best practice, which ensured that staff could stay up to date.

Staff from across the organisation were involved and being encouraged to take part in workshops to look at every aspect of the care and support delivered, to look at how things could be improved and share ideas. For example, workshops on the treatment of LGBT people within health and social care services, recruitment and retention of staff, to involve people in the staff recruitment processes and events such as celebrating 70 years of the NHS. This showed the provider understood some of the challenges they met in providing the support people needed.

The provider continued to develop the service based on the feedback they received from both the people using the service, relatives, staff and health and social care professionals involved in people's care. Regular staff meetings were held and staff spoke positively about having the opportunity within those meetings to raise issues and ideas.

The introduction of a committee made up of people who used the service promoted people's voice and views about the service and they also influenced the development of the service and provider. The staff team and people who used the service worked with partner agencies and had secured an allotment, which they maintained and used to grow their own vegetables.

The provider's quality assurance systems and processes in place helped to monitor and assess the quality of service people received. The management team used the results to identify any trends and learnt lessons from when things went wrong to ensure people continued to receive a quality service that was well managed. A sample of audits we looked at such as review of care plans, medicine audits and staff supervision confirmed that quality checks were used effectively to drive improvements. This helped the provider to evaluate practice, progress and drive improvements.

There was an open and transparent culture. People, staff and families were kept informed about how the service was developing and the provider ensured that any learning from complaints or experiences was shared across the organisation. For example, ongoing recruitment of new staff and improvements made to ensure people were supported appropriately with their medicines.

The provider worked in partnership with other agencies in an open, honest and transparent way. In June 2017, the provider had been awarded an Investors in People accreditation and the service had a Dignity in Care Award from the local authority. We received positive feedback from health and social care professionals who felt the service was well managed and that people received a joined-up care and support that promoted their safety and independence. The local authority commissioner had conducted a quality audit on the service in August 2017 and found the service was compliant with the contractual agreement.