

Flexible Support Options Limited

# Flexible Support Options Limited (Thorntree Way)

## Inspection report

13-15 Thorntree Way  
Blyth  
Northumberland  
NE24 4LS

Tel: 01670545568

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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?	Outstanding ☆
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

Flexible Support Options Limited (Thorntree Way) consists of two purpose built bungalows situated in a residential area of Blyth, Northumberland. It is registered to provide accommodation and personal care for up to ten people with autism and/or a learning disability, some of whom may also have physical disabilities. At the time of the inspection, there were five people living in each self-contained bungalow.

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 living in the home receive planned and co-ordinated person-centred support that was appropriate and inclusive for them.

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

People and staff said they enjoyed living and working in the home. People spoke highly of the care, support and attention they received. This was reflected in the positive attitude and approach of staff and the management team. The management and staff team took considerable time to understand people's needs and were exceptionally skilled at responding to their needs and preferences. This included a thorough understanding of people's communication needs, to enable people to express their wishes and views in a meaningful way. By working in imaginative and person-centred ways, the staff worked to develop people's lives for the better. There were numerous examples of how people had been supported to build their confidence and self-esteem in a supportive and open atmosphere.

People told us they felt safe and staff were kind and caring. Our observations during inspection, were of positive and warm interactions between staff and people. Staff were motivated and demonstrated a clear commitment to providing dignified and compassionate support. Staff understood how to protect people from harm or discrimination and had access to safeguarding adults' procedures. There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. The provider operated an effective recruitment procedure to ensure staff were suitable to work with vulnerable people. Risk assessments were created to enable people to retain their independence and receive care with minimum risk to themselves or others. People were protected from the risks associated with the spread of infection. People received their medicines safely.

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 providing opportunities to gain new skills and become more independent. 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. Staff received training relevant to their role and new staff completed an induction training programme. Staff felt well supported by the management team.

People were involved in the development and review of their support plan documentation and had regular meetings with their keyworker. People had access to a broad range of meaningful activities which improved their quality of life and feelings of well-being.

The service was well-led by a committed management team. Together with the staff team they provided high-quality, person-centred care. The registered manager provided clear leadership and took into account the views of people, their relatives, staff and visiting professional staff about the quality of care provided. The registered manager and staff used the feedback to continuously improve people's experience of care.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (published 25/05/2017).

#### 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 re-inspection programme. If we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

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.

# Flexible Support Options Limited (Thorntree Way)

## **Detailed findings**

## Background to this inspection

### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

### Inspection team

The inspection was carried out by one inspector.

### Service and service type

Flexible Support Options Limited (Thorntree Way) is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

### Notice of inspection

We gave the service 4 hours' notice of the inspection. This was because the service is small, and people are often out. We wanted to be sure there would be people at home to speak with us and the registered manager or staff were available.

### What we did before the inspection

Before the inspection, the provider completed a Provider Information Return. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. This information helps support our inspections.

We reviewed other information we held about the service such as notifications. These are events that happen in the service that the provider is required to tell us about. We also sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

#### During the inspection

We spent time and spoke with seven people living in the home. We also spoke with three members of staff, the team co-ordinator and the registered manager. We looked at the care records of two people who used the service and looked around the premises. We observed staff interaction with people. We reviewed a range of records. This included five people's medication records, one staff file in relation to recruitment and staff supervision. We also reviewed a variety of records relating to the management of the service, including policies and procedures.

#### After the inspection

We continued to seek feedback from the provider to validate evidence found. The registered manager sent us additional information relevant to the inspection.

# Is the service safe?

## Our findings

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

At the last inspection, this key question was rated as good. At this inspection, this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had established systems and processes to safeguard people from abuse. People told us they felt safe and were happy with the care and support they received. One person told us, "I feel safe here, there are always staff around to talk to and help us."
- Staff knew they could report any concerns about people's welfare to other authorities including the police, social services and CQC. They also understood when and how to use the whistleblowing policy. This policy enabled staff to report any concerns about poor practice in a confidential manner.
- Staff had completed training and had access to a safeguarding policy and procedure which set out actions to take in the event of a safeguarding concern.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health, safety and wellbeing were well managed. Risk assessments covered all aspects of people's lives and included guidance for staff on how to manage risks in a safe and consistent manner. Specific assessments were also carried out to assess particular risks to individual people.
- Staff responded calmly and sensitively to any distressed behaviour and supported people how and where they wished. This ensured people's dignity, human rights and safety were upheld.
- The registered manager had carried out environmental risk assessments to ensure the safety of people's living space. The provider had arrangements to carry out maintenance and safety checks on the installations and equipment. All safety certificates were complete and up to date.
- The provider had a business continuity plan which described how people would continue to receive a service in the event of adverse circumstances, such as bad weather. The plan had been discussed with staff, so they were aware of what to do and who to contact in the event of an emergency.
- The registered manager had developed systems to learn lessons and improve the service when things went wrong. We saw there were appropriate systems to record and manage any accidents and incidents. The registered manager had carried out investigations as necessary following any incidents and had discussed the learning with the staff team.

Staffing and recruitment

- The provider had suitable staffing arrangements to meet the assessed needs of people in a person-centred and timely way. We observed staff going out on activities and spending time with people during the inspection.
- The registered manager and staff adopted a flexible approach to ensure people's needs were met. This included supporting them on holidays, appointments and social events.
- The provider followed safe recruitment systems and processes to protect people from the employment of

unsuitable staff. We looked at one staff recruitment file and found appropriate checks were carried out prior to employment.

#### Using medicines safely

- Medicines were managed safely and people received their medicines when they should. People told us they were satisfied with the way staff managed their medicines. One person told us, "I always get my tablets on time." People's medicines were regularly checked and reviewed by their GP
- The staff had completed appropriate training and the management team carried out checks on their competence and practice. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required.
- The management team carried out audits regularly to ensure any potential errors were picked up and addressed quickly.

#### Preventing and controlling infection

- The provider had established good infection control practices. Staff followed the provider's policies and the home was clean and hygienic throughout. People said the home had a good level of cleanliness and was well maintained.
- Staff had received training in prevention and control of infection and were provided with appropriate protective clothing, such as disposable gloves and aprons.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection, this key question was rated as good. At this inspection, this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

### Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires 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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The management team and staff had attended MCA training and were aware of the need to obtain consent when they supported people. They understood the ways people communicated their consent including how people expressed themselves non-verbally.
- Staff made sure people were supported to have maximum choice and control of their lives and supported them in the least restrictive way possible. Best interest meetings had been held to ensure people's rights were protected.
- The registered manager managed the DoLS process effectively.

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

- The registered manager and staff ensured people received a well-balanced diet, which met their needs and dietary preferences. People told us they were satisfied with the food. One person said, "The food is very nice. They always ask us what we want and they know my favourites."
- Staff encouraged and supported people, where possible, to be involved in planning menus, shopping for ingredients and preparing meals. This enhanced their skills and promoted independence.
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals, where required. People's dietary intake was recorded on daily monitoring charts. Staff followed advice from Speech and Language Therapists and Dietitians and had ready access to people's eating and drinking plans.

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

- The management team carried out detailed assessments of people's needs, before they received a service, unless they moved into the home in emergency circumstances. This ensured the staff team had the resources and training to meet people's individual needs. We looked at completed assessments and noted they covered all aspects of the person's needs.
- People's diverse needs were detailed in their assessment and support plans and met in practice, this included support required in relation to their culture, religion, lifestyle choices and diet preferences.

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

- People were supported with their healthcare needs and staff had strong supportive relationships with other agencies and professionals to provide a flexible and effective service, which adapted to people's needs. One person told us, "The staff would always call a doctor if we were ill and they help us when we see a doctor."
- People's physical and mental healthcare needs were documented within their personal files. This helped staff to recognise any signs of deteriorating health. The staff also had access to people's health action plans, which included a hospital passport and an annual health schedule. The latter provided a record of people's medical and other healthcare appointments over the course of a year. A hospital passport provides information for medical staff about people's needs and preferences.
- The registered manager had established good arrangements to meet people's oral healthcare needs. Staff had completed oral care training and the registered manager ensured staff had access to the relevant guidelines and information about oral care. Staff recorded people's teeth and mouth care on daily monitoring charts.
- Staff worked closely with other social care and healthcare professionals as well as other organisations to ensure people received a coordinated service. They shared appropriate information when people used other services. In this way, people's needs were known, and care was provided consistently.

Staff support: induction, training, skills and experience

- Staff were provided with appropriate support and training. People told us the staff were competent. One person said, "All the staff are very good."
- New staff were supported through an induction programme and the provider's mandatory training was provided for all staff members. This helped to ensure the workforce was kept up to date with current legislation and good practice guidance. The registered manager monitored staff training to ensure staff completed the training in a timely manner.
- Staff were provided with one to one supervision and an annual appraisal. These forums facilitated discussions around work performance, training needs and areas of good practice. Staff demonstrated a good awareness of their working roles and responsibilities and confirmed their training was on-going and relevant.

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

- The design and decoration of the service met people's needs. People's bedrooms were personalised and decorated with items meaningful to them. The communal areas were accessible and there was outside space for people to spend time outdoors if they chose.
- Appropriate adaptations had been made to the premises to ensure people's needs were met and they were able to move freely around the bungalows.
- Since the last inspection, the kitchens had been refurbished and the bathrooms had been redecorated, along with the corridors and the lounge in one bungalow. The provider also had plans to refurbish the bathroom in one bungalow.

# 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

- Staff promoted people's rights and delivered person-centred care. All people expressed satisfaction with the care provided and made complimentary comments about the staff team. One person told us, "All the staff are lovely and friendly. We all get on well together." We observed staff supported people in a patient, warm and friendly manner.
- The registered manager promoted and encouraged inclusion. Staff had received training on equality and diversity issues and had access to a set of policies and procedures. Staff and people had begun to explore and learn about different faiths and had been invited to visit a Sikh temple.
- Staff and people had developed positive and supportive relationships. People and staff had a shared sense of humour; the atmosphere of the home was welcoming and engaging.
- The management team and staff spoke about people in ways which demonstrated they cared for them on an individual level and enjoyed their company and personalities. The registered manager told us, "We strive to empower the service users to lead full and happy lives."

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

- People were involved in decisions and consulted in individual and meaningful ways. People were consulted about their care needs and personal preferences. All people confirmed they were aware of their support plans and had been involved in reviews.
- People were encouraged to make choices about their day to day routines, in line with their personal preferences and were supported to express their views. Staff were committed to ensuring the best possible outcomes were achieved. They spent time with people to understand their preferred methods of communication, including non-verbal communication.
- People were provided with appropriate information about the service. The information included details about what people could expect from the service and how they could access other organisations and networks. Staff explained the information to people, as appropriate.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected. Staff encouraged people to develop their self-esteem to enable them make choices and express their preferences. The staff offered people opportunities to increase their independence and to have freedom and control over their lives. People told us they could choose what they wanted to do.
- We observed staff knocking on people's bedroom doors before entering and giving people privacy.
- Staff had access to policies and procedures about caring for people in a dignified way. This helped to

make sure staff understood how they should respect people's privacy and dignity in a care setting.

- Staff understood their responsibilities for keeping people's personal information confidential. People's information was stored and held in line with the provider's confidentiality policy and with current regulations.

# 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 had 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

- People's care and support was person-centred, focussed on all aspects of their lives and responsive to their needs. People told us they were very happy with their care and staff responded in a timely way to any requests made for assistance. One person told us, "The staff are really helpful and help us sort out any problems."
- The management and staff were fully committed to providing people with compassionate care and support in a kind and patient manner. We found numerous examples of how staff had changed people's lives. For instance, one person had extreme anxiety, significant weight loss and separation issues when they moved into the home. The person's distress manifested itself as severe difficulties with eating, sleeping and socialisation. The registered manager explained, "With care, compassion and dedication from all the team we were able to build up a rapport with [the person] and they slowly allowed us into their life." The staff employed imaginative and person-centred techniques and over a period of a year the person gradually settled into their new life. The registered manager added, "Today we are proud to say [the person] has gained a significant amount of weight and they fill their day with activities. They go on the trampoline and bikes and even have a go at archery." During the inspection, the person happily showed us photographs and told us about their interests and achievements.
- People achieved positive and meaningful outcomes through their care and support being tailored to the individual needs and wishes. We saw each person's support documentation contained detailed information around their care and support needs to guide staff.
- The management and staff team were highly responsive to identifying changes in people's needs and ensuring they continued to be supported appropriately. Support plans and risk assessments were 'live documents' and reviewed at least every three months or in line with any changing needs. Staff knew the people they were supporting extremely well and were alert to any changes in people's behaviour or need for support.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to make their own decisions regarding their care, how it was delivered and what activities they wished to do. Staff ensured people understood the choices available to them and they acted on their preferences.
- There was a strong focus on activities and community participation. All people had an activity plan, and a wider community document which monitored where they had been, what they have done and if they have enjoyed the activity. All people were involved in a wide range of activities in accordance with their interests

and preferences.

- The registered manager explained, "This is their home and we take pride in making sure our service users are part of the community and remain visible and active." They told us about a person who before they moved into the home was previously segregated due to their complex needs and behaviour which challenged others. The staff spent considerable time getting to know the person to build up a positive relationship and gain a thorough understanding their needs. The registered manager said, "Now, [the person] is a very calm and relaxed person who leads a full and enriched life. Their distressed behaviours became a thing of the past. They have recently participated in an important family event and enjoyed going on an aeroplane and having a holiday abroad which we were told would never be achievable."
- Similarly, another person moved into the home following a breakdown in their previous placement due to behaviours which challenged others. The situation had severely affected the person's health and well-being. The staff supported the person on a series of healthcare appointments. Over time, the person regained their confidence and they built positive and meaningful relationships with others both in the home and in the wider community. During the inspection, the person told us how they enjoyed helping the staff and living in the home. They said, "It makes me happy here. It's like everyone is best friends with everyone."

### 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.

- Staff had a clear understanding of each person's individual communication preferences and were able to understand each person's requests and concerns.
- People's individual communication needs were identified during their initial assessment and reviewed as required. This meant support plans contained clear and up to date information about people's communication needs. All people had a communication passport which detailed their preferences and likes and dislikes and all staff had completed training in communication and understanding how to treat people with respect.
- People with protected characteristics as defined in the Equality Act, were exceptionally well supported. We saw excellent examples of staff going above their normal duties to address people's communication needs in relation to their protected equality characteristics and ensuring they could be the person they wanted to be. For instance, one person used picture cards.
- One person using the service lived with extreme sensory impairments. The team co-ordinator explained at first the staff team were unable to meet the person's communication needs. They accessed a specialist association, whose representatives visited the home and provided bespoke training for the staff and the person. As a result, the staff were able to communicate with the person using a specially designed alphabet. The person was able to learn new skills and they were able to integrate more with other people living in the home. The registered manager stated in the provider information return, "We are now confident we can support them in the home and out in the community where they regularly attend day services, accompanied by staff, including horticultural activities and the local community centre."

### End of life care and support

- People were supported to stay in their own home for as long as their needs could be met with assistance from community based palliative care services, as required. People's end of life wishes had been explored and were recorded in their support plan documentation.
- All staff had completed end of life training and the registered manager had organised for a funeral director to visit the home to talk about what arrangements were in place after people left the home.
- The staff team had recently cared for a person at the end of their life. The registered manager had ensured

there was always a member of staff with the person to ensure their comfort. The person's life was commemorated in the home and we saw photographs of the occasion, where people and staff attached messages to balloons which were let off into the sky. We noted the registered manager had received a compliment about the care provided, which described the staff support as, "Excellent and very person-centred."

Improving care quality in response to complaints or concerns

- The provider had established a system to record and monitor any complaints, compliments or concerns. The information was used to understand how they could improve or where they were doing well.
- People had access to a complaint's procedure, knew how to make a complaint and were confident they would be listened to. One person told us, "If we have any problems [the registered manager] sorts them out straightaway."

## Is the service well-led?

### Our findings

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

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

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager engaged people, relatives, staff and visiting professionals in the development of the service. All people were invited to complete a satisfaction questionnaire every six months. The questionnaire responses were collated at head office. We saw the results for the whole organisation. The registered manager assured us results for each location would be collated going forward.
- We looked at a sample of the returned questionnaires and noted people indicated a high level of satisfaction. We saw a relative had written, "I am very happy with the care my [family member] receives at Thorntree" and another relative had commented, "Continue the wonderful work the staff are doing."
- Staff involved people in the service wherever possible and gave consideration to their equality characteristics. The registered manager encouraged people to express their views via daily conversations, support plan reviews and regular meetings, including time with their keyworker.
- The registered manager and staff worked in partnership with external agencies to learn and share knowledge that promoted continued service development.

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

- The registered manager and staff had a clear understanding of their roles and contributions to service delivery. Staff morale was good, and they felt valued and supported. One staff member commented, "I really enjoy working here. I love everything about it. Everyone is so friendly, and everyone helps each other."
- The registered manager had established systems to monitor the quality of the service. They undertook audits and had drawn up action plans to address any shortfalls.
- People and staff spoke positively about the way the service was managed and the registered manager's leadership style. A person told us, "[Registered manager] is lovely. She makes me laugh and makes me happy. She looks after everyone" and a staff member said, "[Registered manager] has high standards and is highly organised. She is always available if we need any help and is always cheerful."
- The registered manager utilised the quality assurance systems and staff meetings to ensure continuous learning and improvements took place. Staff told us they were comfortable in raising any issues or concerns within the meetings and the registered manager was open to feedback.

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 registered manager understood and acted on their duty of candour responsibilities. They promoted



and encouraged candour through openness. The registered manager and staff were open and honest. Good relationships had been developed between the registered manager, staff and people living in the home.

- The registered manager told us she spoke with people when things went wrong and apologised where necessary. Any incidents were fully discussed with staff during meetings or in one to one support sessions.
- The registered manager was aware of the need to notify CQC or other agencies of any untoward incidents or events within the service. Incidents that had occurred had been managed correctly in consultation with other agencies whenever this was necessary.

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

- The provider, registered manager and staff promoted the provision of high-quality, person-centred care. We observed a positive and welcoming culture within the home. Staff told us they felt everyone was well supported and they all told us how much they enjoyed their work.
- The registered manager knew the people who lived in the home well and was knowledgeable about their needs and preferences. She often worked alongside staff providing people with care and support. This meant she had a good understanding of the complexity of people's needs and the pressures placed on staff.
- The registered manager told us she was proud of the staff and their commitment to strong teamwork. The management team also worked well together and had a strong supportive relationship.