

Upward Care Limited The Willows

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

This inspection site visit took place on 22 November 2018 and was announced.

Upward Care Limited provides care and support to people living in supported living' settings, so that they can live as independently as possible. It provides personal care to adults with learning disabilities within five shared buildings, The Willows, Stoney Close, Nethercote Gardens, Chelmsley Lane and Greytrees Crescent. Up to 24 people can receive a service.

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. At the time of this inspection 24 people received a service and all were in receipt of the regulated activity personal care.

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.

A requirement of the service's registration is that they have a registered manager. 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 a legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. A registered manager was in post.

People and their relatives confirmed they received safe care. Risk management plans provided staff with the information they needed to keep people and themselves safe.

Staff had completed safeguarding adults training and knew how to protect people from the risk of abuse. Staff understood their responsibilities in relation to infection control which protected people from the risk of infection.

Action had been taken when accidents and incidents had happened to prevent any reoccurrence.

Enough staff were employed to meet people's needs in a timely way and records showed staff had been recruited safely. New staff received an induction when they started work at the service. People told us staff had the skills and knowledge they needed to meet their needs.

The provider was working within the requirements of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS). People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

Some people were supported with the preparation of meals and drinks. Staff knew how to monitor people's

nutrition and hydration which supported them to remain healthy.

The service worked in partnership with other health and social care professionals to support people to maintain their well-being and health.

People told us staff were caring and staff practices during our visit demonstrated people mattered. People were involved in the planning and review of their care. Care was provided in line with people's wishes by a consistent staff team.

Staff knew people well and understood how people preferred to communicate. The management team and staff demonstrated they understood the importance of promoting equality and human rights.

People were encouraged to maintain their interests and relationships that were important to them.

People were supported to be independent and their rights to privacy and dignity was respected.

People received information about the service in a way they could understand, and a system was in place to manage complaints about the service provided.

People and relatives told us the service was well-led. Staff enjoyed working at the service because they felt supported and valued by their managers.

People were involved in developing the service through monthly tenant's meetings. Regular feedback was gathered from people and their families on the service they received to drive forward improvement.

Systems to monitor, assess and improve the quality and safety of the service were effective. The registered manager understood the responsibilities and the requirements of their registration.

The five questions we ask about services and what we found

We always ask the following five questions of services.

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|--|---------------|
| Is the service safe? The service remains good. | Good ● |
| Is the service effective? The service remains good. | Good ● |
| Is the service caring? The service remains good. | Good ● |
| Is the service responsive? The service remains good. | Good ● |
| Is the service well-led? The service remains good. | Good ● |

The Willows

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.

We visited the provider's office located at The Willows on 22 November 2018. The visit was announced. We told the registered manager 48 hours before our visit we would be coming so they could make sure they would be available and arrange for us to speak with people and their staff. The inspection team consisted of one inspector.

We inspected the service because it was previously rated 'Good', and it was time for us to return to check whether the rating continued to be 'Good'.

Before our inspection we reviewed the information we held about the service. We looked at the information received from our 'Share Your Experience' web forms and the statutory notifications the service had sent us. A statutory notification is information about important events which the provider is required to send to us by law.

We also spoke with local authority commissioners. They did not have any information they needed to share with us. Commissioners are people who find appropriate care and support services for people and fund the care provided.

We reviewed information the provider had sent us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give us some key information about the service, what the service does well and improvements they plan to make. During our visit we found the information contained in the PIR accurately reflected how the service operated.

During our visit we spoke with five people who used the service to gather their views on the service they received. We also spoke with the registered manager, the operations director and three support workers to find out what it was like to work at the service.

We reviewed the care records of three people to see how their care and support was planned and delivered. We looked at two staff recruitment files, records of complaints and the provider's quality monitoring systems to see how the service operated.

Following our visit, we spoke with two people's relatives who used the service via the telephone to gather their views on the service people received.

Is the service safe?

Our findings

At our last inspection, we rated the safety of the service as good. At this inspection we found people continued to receive safe care and support. The rating continues to be Good.

People felt safe. One person said, "I feel safe in my flat, staff are here if I need them." A relative told us, "(Person) loves living at Chelmsley Lane. It's their safe place."

Procedures were in place to protect people from harm. Staff had attended safeguarding adults training and described different signs which may indicate someone was being abused. For example, a person may become withdrawn. One staff member said, "If I reported a concern the managers would take immediate action to keep someone safe. If they didn't I would phone social services."

We saw risk management plans provided staff with the up to date information they needed to provide safe support. Staff knew how to manage risks. For example, one person was at risk of choking when drinking and eating. A staff member said, "We add thickener to drinks and puree food. We also stay close by whilst they eat just to make sure they are okay."

People confirmed enough staff were employed to meet their needs in a timely way. Staff told us they were allocated sufficient time on their rota's to provide the support people required. One said, "We provide support flexibly, when people need it. We have plenty of time and never have to rush."

People were involved in the recruitment of new staff and records confirmed staff had been recruited safely. This included obtaining references and a Disclosure and Barring Service (DBS) check before staff had started working at the service. The DBS is a national agency that keeps records of criminal convictions.

People and their relatives told us their medicines were managed and administered safely by the service. Medicine administration records we reviewed confirmed people's medicines had been given as prescribed. Staff completed training to administer people's medicines and their competencies were assessed to ensure they completed this task safely. Medicine audits took place which meant if any errors were identified prompt action could be taken.

Accidents and incidents that happened were reviewed by the registered manager to prevent any reoccurrences. For example, one person had fallen on a staircase. To prevent further falls the staircase handrail had been painted in a bright colour, so the person could see it more easily. The person had not fallen again.

Staff understood their responsibilities in relation to infection control which protected people from the risk of infection. One staff member said, "We had training. We wear gloves and aprons during care tasks and wash our hands before preparing food to reduce risks."

Is the service effective?

Our findings

At our last inspection, 'effective' was rated as 'Good'. At this inspection people continued to receive effective care and support. The rating continues to be Good.

People and relatives felt staff had the skills and knowledge they needed to meet their needs. One person commented, "They [staff] really know how to look after me."

New staff received the support and training they needed to carry out their roles effectively when they started work at the service. This included the Care Certificate which sets the standard for the skills, knowledge, values and behaviours expected for health and social care workers.

A variety of training methods were used to ensure staff kept their skills and knowledge up to date which included training workshops and distance learning. The provider also had an 'in-house' trainer who adapted training to suit the needs of individual staff. Staff provided positive feedback about their training. One said, "We gets lots and lots of training. If we ever ask for more, we get it." Checks to ensure staff put their learning into practice and to check they were competent to carry out their roles were completed by managers.

Staff told us they received regular one to one supervision from the management team which made them feel supported and gave them the opportunity to discuss and reflect their work performance.

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

We found the provider was working within the requirements of the MCA. People who received a service had capacity to make some day to day decisions and had somebody who could support them to make more complex decisions in their best interest, such as a relative. This meant the rights of people who were unable to make important decisions were protected.

Staff had completed training to help them understand the principles of the Act and knew they could only provide care and support to people who had given their consent. One said, "People have the right to refuse. I always ask them if they want my help."

If required staff assisted people to purchase their food and prepare their meals and drinks. One person said, "We go shopping and then they [staff] help me to cook what I want." Staff knew how to monitor and manage people's nutrition and hydration. For example, one person ate small portions of food. Staff encouraged them to consume whole milk and foods with a high calorific value which supported them to remain healthy.

Records showed the service worked in partnership with other health and social care professionals such as, psychologists. This meant people received the support they needed to maintain their well-being and health.

Is the service caring?

Our findings

At our last inspection, 'caring' was rated as 'Good'. At this inspection people continued to receive the same level of caring support. The rating continues to be Good.

People told us staff were caring. One person said, "Nice staff, I like it here. I'm happy." A relative told us, "[Person] loves all the staff. I can't fault them they are so kind."

The providers PIR stated, "Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment, or the smallest act of caring, all of which have the potential to turn a life around."

During our visit staff practices demonstrated people mattered and the care and support provided was an accurate reflection of the PIR. For example, staff were patient, they listened to people and spoke with people in a respectful way.

All of the staff we spoke with told us they enjoyed their jobs and they would be happy for someone they loved to receive care and support from the service.

Staff demonstrated they knew people well and they understood how people preferred to communicate. For example, when one person stuck their tongue out staff knew this meant they were feeling unhappy or upset. Because staff knew what this gesture meant they could offer the person reassurance and comfort.

People had opportunities to maintain relationships that were important to them. For example, one person was supported to use the internet to connect with their friends and family.

Friendships had developed between some people who received a service. Staff recognised the importance of these relationships and the positive benefit this had on people's well-being. For example, people had recently been supported to arrange a 'curry night' which people told us they had really enjoyed.

Our discussions with the management team and staff demonstrated they understood the importance of promoting equality and human rights. One staff member commented, "We recognise everyone is different here and provide care and support in line with people's wishes and choices."

One aim of the service was to promote people's individuality and independence. People told us this was achieved because they were supported to achieve their important goals. For example, making themselves a sandwich and cleaning their flat.

People's right to privacy was respected. We saw staff knocked on people's doors and waited for permission before they entered. Staff described how they promoted people's dignity which included covering people with towels when they assisted people with personal care.

Managers and staff understood the importance of keeping people's personal information confidential. Copies of people's care records were kept securely and were only accessible to staff who had the authority to see them.

Is the service responsive?

Our findings

At our last inspection we rated this key question as 'Good'. At this inspection the service continued to be responsive to people's needs. Therefore, the rating continues to be Good.

A fundamental aim of the service was to 'provide personalised care'. People, relatives, and staff provided us with feedback which demonstrated this was achieved. A relative said, "The staff really think outside the box and make things happen for people."

One person said, "We wanted to go on holiday together so ... we went!" The registered manager explained they had supported people to 'make their holiday happen' by arranging for equipment such as a hoist to be provided at their holiday accommodation to ensure people's needs could be met. (A hoist is a piece of equipment used to enable people with limited mobility to move around safely).

People were encouraged to maintain interests which were important to them. One person enjoyed football. They had a season ticket for their favourite team and they were supported by staff to attend all home football matches. Their relative told us, "[Person] absolutely loves going, the staff are so committed they never misses a match."

Before people received a service, they were fully involved in a detailed assessment of their needs based on what was important to them from their perspective. From the initial assessments detailed care plans were devised to ensure staff had information about how people wanted to be supported in line with their wishes.

A 'keyworker system' was in place and people had chosen their keyworkers. A keyworker is a named member of staff who is responsible for ensuring a person's needs are met. Record showed people met with their key workers each month to review their care and support.

People received information about the service in a way they could understand. For example, in picture format and braille. This was in line with the 'Accessible Information Standard' (AIS). This is a framework which places a legal requirement on providers to ensure people with a disability or sensory loss can access and understand the information they are given.

No complaints had been received about the service since our last inspection. People knew how to make a complaint and told us they would feel comfortable doing so. Discussions with staff demonstrated they understood their responsibilities to support people to share concerns and make complaints.

Is the service well-led?

Our findings

At this inspection, people, relatives and staff told us the service continued to be well-led because they trusted and had confidence in the management team. Comments included, "I really like the manager, she is good." and, "The managers are just wonderful. It's a really professional set up. I have 100% faith in them." The rating continues to be Good.

An experienced registered manager was in post. At the time of our visit they had been promoted to a more senior managerial role within the organisation. Therefore, they were in the process of deregistering with us. A new manager had recently started working at the service and they were in the process of registering with us.

The registered manager used different methods to ensure they kept their knowledge of legislation and best practice up to date. For example, they attended local managers forums and spent time reading to increase their understanding of the regulations associated with the Health and Social Care Act 2008.

People were involved in developing the service through monthly tenant's meetings, and frequent satisfaction questionnaires. Relatives had opportunities to express their opinions. One relative explained the registered manager often phoned them up to ask if they were satisfied with the service provided. They said, "I think it's a good thing that the managers ask questions they are always looking at making improvements."

Staff told us communication at the service was good. This was because regular team meetings took place which gave them the opportunity to discuss any issues of concern and suggest ideas for improvement with their managers.

Staff confirmed their managers were available whenever they needed them because they had an 'open door policy.' Also, the provider operated an 'on-call' system so staff could seek management support outside of normal office hours.

The management team recognised the contribution and dedication of their staff. A staff recognition scheme was in place which staff told us made them feel valued and appreciated.

Effective systems were in place to monitor, assess and improve the quality and safety of the service. Audits and checks were completed by the management team to ensure people had received the care and support they needed. The registered manager told us if audits had identified actions required, these were put into an action plan which would be monitored to drive forward improvement.

The registered manager understood the responsibilities and the requirements of their registration. For example, we had received notifications from the service as required so we were able to monitor and changes or issues within the service.

It is a legal requirement for the provider to display their latest CQC ratings to ensure the public have

information about the services rating. We saw the rating was displayed on their website.