

1st Enable Ltd

1st Enable Cheshire East

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

1st Enable Cheshire East is a supported living service providing personal care to 27 people at the time of the inspection.

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

Right Support:

Trained and competent staff supported people to manage their medicines. Medicine care plans held sufficient information to support staff to meet people's individual needs. Staff supported people to manage their medicines and promoted their independence where possible. The provider had used STOMP (stopping over-medication of people with a learning disability, autism or both) to reduce the use of unnecessary medicines.

People could choose their living environment and had personalised their living space. We received positive comments that included, "I've got my Flat how I like it.", "I love my flat, I feel so safe here." and, "I didn't like the last place I lived in. I moved here a few months ago and I am so happy."

People were supported to maintain their own health and wellbeing where possible.

People were supported by safely recruited regular staff who knew them well. Staff had the necessary skills and knowledge to meet their individual needs.

Risks to people's safety were assessed and monitored and people had personalised risk assessments in place.

People spoke positively about their participation in activities of their choice. People described the many activities they participated in including shopping, theatre visits, shows, café outings, volunteering opportunities and holidays.

People were supported with their communication needs. Staff understood individual communication styles. Information was made available in accessible formats, such as, easy read and pictorial.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported

this practice.

Right Care:

People described staff respecting their privacy and dignity. People told us staff were kind and caring.

Staff wore PPE (Personal protective equipment) in accordance with good practice guidelines and ample supplies were available. Staff had received training in infection prevention and control.

Staff had a good understanding of how to protect people from poor care and abuse. They were very clear of the actions they would take to keep people safe and were confident any concerns raised would be promptly acted upon.

People and their relatives had been involved in the development of their care plans. The plans were personalised and included information on people's healthcare needs, preferences, challenges and hobbies.

People could take part in activities and pursue interests of their choice. Comments from people included, "I went to see Abba Mania and danced all night." and "I love playing games on my computer."

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Right Culture:

The provider and registered manager had developed a positive culture at the service and continually involved staff and people supported in its development.

People, their relatives and appropriate health and social care professionals fully participated in the review of people's care plans and the support they received.

The management team undertook regular audits to look at ways of developing and improving the service.

Staff were complimentary about the management of the service. They told us they felt valued and were encouraged to raise concerns as well as new ideas with the registered manager.

Staff demonstrated a desire to make a positive difference to people's lives and continually worked to improve people's independence.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 26 March 2020 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook this inspection to assess that the service is applying the principles of Right support, right care, right culture.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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?

Good ●

The service was 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.

1st Enable Cheshire East

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 3 inspectors.

Service and service type

This service provides care and support to people living in 6 'supported living' settings, so that they can live 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since they were registered. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us

annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke to 11 people supported. We spoke with 16 members of staff including the registered manager, area manager, service managers, positive behaviour support regional manager, positive behaviour support facilitator, senior support workers and support workers. We spent time observing the support and communication between people and staff in shared areas of the houses we visited.

We reviewed a range of records. This included 7 people's care records and medication records. We looked at 8 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke to 4 relatives by telephone.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm and abuse. Staff knew about the different types of abuse. They told us the registered manager and senior management team were approachable and always listened. They would not hesitate in raising any concerns they had. Staff were confident action would be taken straight away. They knew who to contact outside of the organisation to raise their concerns if necessary.
- People appeared relaxed, comfortable and happy when spending time with the staff members supporting them. People told us that they felt safe in their homes. One person said, "I feel safe living here. Staff are here 24 hours a day if I need them."
- Staff received safeguarding training and the registered manager had a good understanding of safeguarding and their responsibility to escalate safeguarding incidents appropriately.
- The provider ensured safeguarding information was available to people in a variety of formats, this included pictorial and easy read.

Assessing risk, safety monitoring and management

- Detailed risk assessments had identified hazards and guided staff on how to reduce or eliminate the risk and keep people and staff safe. The registered manager and staff team assessed risks to people and supported them to lead the lives they wanted to live whilst reducing the risk of harm where possible.
- People were fully involved where possible in managing risks to themselves and in taking decisions about how to keep safe.
- People had positive behaviour support plans in place where needed. These set out the support people required to manage behaviours that may challenge staff and other people. The plans included clear information and guidance about signs for staff to look out for and actions needed to support people effectively and keep them safe.
- The service planned for emergency situations, such as staff shortages and power cuts. Additionally, the service operated a 24 hour on call service to support both people and staff.
- Staff managed the safety of each person's living environment and equipment. Staff had completed Personal Emergency Evacuation Plans (PEEPs) for people which included consideration of specific risks.

Staffing and recruitment

- The provider followed safe and effective recruitment practices. This included checks with the Disclosure and Barring Service (DBS), requesting references from previous employers about their conduct in previous jobs and health checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staff had completed an induction and undertook shadow shifts before they commenced lone working at

the service. Comments from staff included, "I was new to working in care. I did the induction and multiple shadow shifts. Senior staff still show me new tasks to enable me to feel confident to do it myself. The whole team are always so supportive." and "Shadow shifts really helped me get to know people before I worked with them by myself."

- There were enough staff to support people's assessed needs. Staffing levels were calculated to ensure people's individual needs were met. Some people received one-to-one hours of support to take part in the activities they enjoyed.

Using medicines safely

- Medicines were managed safely by trained and competent staff. Staff demonstrated a good understanding of how to administer medication and records were completed in line with the provider's policies and procedures.
- Staff promoted and adopted least restrictive practices to administer medicine. People were enabled to self-administer and make decisions about medicines wherever possible.
- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles.
- Regular audits were conducted by designated staff and the registered manager to ensure there was good oversight. This ensured any errors were identified quickly and acted upon.

Preventing and controlling infection

- People were supported by staff who had been trained and understood the importance of infection prevention and control measures. Staff had their competency checked to make sure personal protective equipment (PPE) was put on, taken off and disposed of safely.
- The provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- Staff recognised accidents and incidents and reported them appropriately.
- The Management team carried out investigations following all accidents and incidents. They undertook analysis to identify lessons learned which informed improvements at the service.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Prior to being supported by the service, an assessment of people's needs was completed by a member of the management team. This reviewed the support people needed, and if the service could provide this support. The assessment took into consideration people's protected characteristics, like human rights and communication. Relevant guidance was followed such as positive behaviour support guidance on how to support people who are communicating a need, expressing feelings or an emotional reaction.
- Assessments involved people and their representatives including relatives, as well as health and social care professionals. Assessments focused on what each person hoped to achieve by using the service. This included if they hoped to be more independent and to take part in day to day activities.
- Support plans were detailed and reflected a good understanding of people's needs, including relevant assessments of people's communication support and sensory needs.

Staff support: induction, training, skills and experience

- Staff received training appropriate to their role. The service had clear induction procedures and peer support for new staff. Training was a mix of classroom sessions and eLearning.
- The provider checked staff competency to ensure they understood and applied training and best practice to their role. This included moving and handling and medicines.
- Staff met with managers regularly to review support needs and to discuss development opportunities. Comments from staff members included, "I feel really supported.", "I've had probation meetings as I have settled into my role which were helpful as I was new to working in care." and "Supervision is used to highlight areas of development in a positive way and I feel really well supported."
- Staff had a good understanding of equality and diversity, which was reinforced through training. They supported people to make choices to live in any way they wished, and ensured their rights were protected.

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

- People's dietary needs were assessed and recorded in their support plans. People were educated about food choices and activity levels to promote their health and wellbeing. Staff promoted healthy lifestyle options and respected people's decisions.
- Staff had a good knowledge of people's food and drink preferences. Comments from people included, "Staff help me to cook my meals, I like this." and "I have dinner with two of my friends that live here also. Staff support us with planning and cooking what we would like or getting takeaway."
- People had access to health professionals who supported them with their diet and provided information in a format that met people's communication needs.

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

- People had access to healthcare professionals and where appropriate, referrals were made to external services to support people's needs.
- The staff and management team worked well with other health and social care professionals, and this was documented within people's care plans.
- People were supported to access routine health care appointments that included visits to the GP and hospital.

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 MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The staff and management team had a good understanding of their responsibilities which ensured people were supported in line with the MCA. When people were not able to make a decision about their care and support, meetings were held with the relevant people, such as relatives and health care professionals, to make sure decisions were made in the person's best interest.
- Staff had undertaken training on the MCA and understood the principles of this and how to apply it to their day-to-day work.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- People received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to.
- Staff were very good at recognising when people were becoming distressed or anxious and provided sensitive and respectful support to help manage this. The approach staff took helped create a calm and relaxed environment which helped to reduce the distress that people experienced.
- There was a strong emphasis on person centred support. Staff were compassionate and all the staff spoke positively about their job. Their comments included, "Making a positive difference to people's lives, means everything to me." and "I enjoy having time to spend with people to develop professional relationships based on respect."

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

- People were supported to express their views and were involved in decisions about their care.
- People were given time to listen to what was being said, process the information and then respond to staff without feeling rushed.
- Staff followed people's chosen routines and preferences. For example, people chose when to get up and go to bed, they chose what to wear and staff respected this.

Respecting and promoting people's privacy, dignity and independence

- Staff supported people and encouraged them; to be as independent as possible. For example, some people were supported to participate in volunteering opportunities, one person had gained employment. This enabled them to be part of their local community, develop skills and increase their confidence.
- People's privacy and dignity was protected. Staff were aware of the need to preserve people's dignity when providing care to people in their own home. People's comments included, "Staff respect my privacy and always knock and wait for an answer before coming into my flat." and "Staff are there to support and encourage me whenever I need it and because of this I am getting more independent all the time."
- People's confidentiality was respected. The provider had a confidentiality policy in place that staff could access. Training about data protection and confidentiality was given during staff induction.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Detailed person-centred care plans had been developed. This enabled staff to support people in a personalised way that was specific to their individual needs and preferences. Care plans included details of people's choices about what they did during the day and their preferences for activities.
- Support was clearly focused on people's quality of life outcomes. These were reviewed regularly and adapted as a person went through their life
- People received care from a consistent and regular staff team. Comments from people included, "I know all the staff that support me, and they are great." and "I like all my staff but do have a few favourites."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Care plans included detailed information about people's communication needs. Staff engaged with people in a way that demonstrated they understood their individual non-verbal and verbal communication.
- People received information in ways that were appropriate to meet their needs. For example, easy read, large print, pictorial and through social stories.

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 visit their relatives and maintain friendships. Comments from people included, "I go and visit my Mum every week, I always look forward to this." and "I am going to visit my family at Christmas, I do this every year."
- Staff supported people to enjoy activities and socialise. For example, staff took people shopping, went to music events and spent time getting to know them. Comments from people included, "Staff supported me to go to Abba Mania and I danced all night.", "I choose where I go on holiday and which staff support me." and "I am supported to go out with my friend [Name] and we choose what activity we are going to do."

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and procedure in place that was available in easy read and pictorial formats.

- People told us they felt confident to raise any concerns they had. Comments included, "I have complained, it was investigated, and I was happy with the outcome." and "I know who to speak to if I am unhappy about anything."

End of life care and support

- At the time of the inspection, nobody was being cared for at the end of their life. Where appropriate, care plans contained information about people's wishes and feelings in respect of this aspect of their care.
- Staff told us they felt confident to support people to ensure they had a pain free and dignified end of life, supported by healthcare professionals.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider kept up to date with national policy to inform improvements to the service. The registered manager had considered guidance including the principles of Right support, right care, right culture.
- Staff all spoke highly of the service and felt it was well-led. Staff commented they felt supported and had a good understanding of their roles and responsibilities. A member of staff told us, "I absolutely love my job, I feel so well supported. It's a lovely organisation to work for."
- The management team were visible in the service, approachable, and took a genuine interest in what people, staff, relatives and other health and social care professionals had to say.
- People told us they felt empowered and had an active voice. One person told us they attended 'Speak Out' meetings where they were asked about what they liked about living in the supported living service, what they didn't like and what could be done to change things. The person said they thought this was a really positive process that they valued it."

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 their responsibilities relating to duty of candour. The Duty of Candour is a regulation that all providers must adhere to. Under the Duty of Candour, providers must be open and transparent, and it sets out specific guidelines' providers must follow if things go wrong with care and treatment.
- Staff had received training on whistleblowing and said they would have no hesitation in reporting any concerns they had.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the services they managed.
- The provider had invested in their staff team. This has been achieved by providing them with good quality training to meet the needs of all the people they supported. Staff spoke positively about the training they had completed and opportunities they had been offered to further develop their knowledge and skills.
- Governance processes and auditing systems were effective and helped to keep people safe, protect people's rights and provide good quality care and support. The provider kept systems under review to ensure they remained effective.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and staff were actively involved in developing the service. They told us the provider regularly sought feedback. One staff member told us, "The Directors [Provider] are always asking for ideas and suggestions and they are acted upon." There were systems and processes followed to consult with people, relatives, staff and healthcare professionals.
- Staff described feeling well supported and valued by the management team which promoted a positive culture. One staff member told us, "My manager is really supportive and super helpful.", another told us, "I have been supported during some really tough personal times." and, "I feel confident to speak to my manager about anything inside or outside of work."

Continuous learning and improving care

- Records showed that accidents and incidents had been monitored and recorded. Audits were completed to look for trends and help reduce the risk of further incidents. Appropriate action was taken in response to any accidents and incidents, and advice was sought from other health professionals when needed.
- Staff had a good understanding of equality, diversity and human rights. They described how they ensured that nobody at the service suffered from any kind of discrimination. Staff indicated that the protection of people's rights was embedded into practice, for both people and staff, using and working at the service.
- The provider demonstrated a clear vision for the direction of the service which showed ambition and a desire for people to achieve the best possible outcomes.

Working in partnership with others

- The provider liaised with organisations within their local community. This included the Local Authority and other providers to share information and learning about local issues and best practice in care delivery.
- Staff supported people to obtain and maintain their tenancy and housing agreements and access funding if required.