

Creative Support Limited

Creative Support - Monkway Court

Inspection report

Monkway Road
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Cumbria
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Tel: 01946590418

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24 March 2016

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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 unannounced inspection took place on 24 March 2016. This was our first inspection of the service since it changed provider from Anchor Trust Integrated Care to Creative Support.

Creative Support at Monkway Court provides care to people who live in this sheltered housing complex. There are staff available during the day and night to provide personal care to 27 people who live there.

The service did not 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 legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. We spoke with the manager of the service who explained they were in the process of registering with the CQC.

The service had sufficient appropriately recruited staff available to support people. As part of their recruitment process the service carried out appropriate background checks on new staff.

Staff were aware of how to identify and report abuse. There were policies in place that outlined what to do if staff had concerns about the practice of a colleague or any other person who came into contact with people who used the service

Staff were trained to an appropriate standard and received regular supervision and appraisal.

People who needed support with nutrition and hydration received it.

Medication management was well organised and people received their medication as prescribed.

People told us that staff were caring and treated them with dignity and respect.

Care plans were based on thorough assessments and focused on maintaining people's independence.

There was a quality assurance system in place at the service.

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.

There were sufficient staff to provide support to people.

Appropriate pre-employment checks had been carried out.

Staff understood how to identify and report potential abuse.

The service was commissioned to provide support to some people with their medicines. Where this was the case we saw that medicines were managed appropriately.

Is the service effective?

Good ●

The service was effective.

Staff had received appropriate training.

The service worked in conjunction with other health and social care providers.

People received adequate support with nutrition and hydration where necessary.

Is the service caring?

Good ●

The service was caring.

People told us that staff were caring.

People told us that staff treated them with dignity and respect.

There were plans and procedures in place to ensure that people's privacy was protected.

Is the service responsive?

Good ●

The service was responsive.

Care plans were written in a clear and concise way so that they were easily understood.

People were able to raise issues with the service in a number of ways including formally via a complaints process.

People were supported to access activities if they chose to.

Is the service well-led?

Good ●

The service was well led.

The manager had clear ideas about what the service should provide and provided guidance and leadership to staff.

Staff told us they felt supported by their manager and senior staff.

There was a quality assurance system in place.

Creative Support - Monkway Court

Detailed findings

Background to this inspection

Start this section with the following sentence:

'We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check 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 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 the 24 March and was unannounced.

The inspection was carried out by an adult social care inspector.

Before the inspection the provider completed a Provider Information Return (PIR). 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. We also reviewed the information we held about the service, such as notifications we had received from the registered provider. A notification is information about important events which the service is required to send us by law. We planned the inspection using this information.

We spoke with three of the people who used the service. We also spoke with six staff including the registered manager.

We looked at four records of written care and other policies and records that related to the service. We

looked at two staff files which included supervision, appraisal and induction. We saw a record of training and a training plan. We looked at quality monitoring documents.

Is the service safe?

Our findings

We spoke with people who used the service and asked them if the service had enough staff available to support them at Monkway Court. One person said, "Oh yes, the carers are always on time." Although another person told us, "On nightshift there is only one carer, I think there should be two."

We spoke with staff and asked them if there were sufficient staff to meet people's needs in a timely manner. Staff told us, "Sometimes we can be five to 10 minutes late, but we always pop in and let people know." Another person told us, "There's always enough staff on duty."

We spoke with the manager and asked how they ensured there were sufficient staff to meet people's needs in times of crisis or when people required additional support. They explained that staffing levels were based on people's needs and if those needs changed staffing levels could be increased by offering extra hours to staff within the service. This included at night.

During our inspection we looked at the duty rota and compared it to the needs of the people who used the service.. We saw that there were sufficient staff to meet the identified needs of the people who used the service, this included at night.

We saw that each person had assessments in place that identified risks that they faced and planned ways to reduce them. For example, some people required support to mobilise. Plans were in place to ensure that people were enabled to do this in a safe and appropriate manner.

We spoke with staff and asked how people were protected from bullying, harassment and avoidable harm. Staff explained that they had all had training that ensured they were able to protect vulnerable people from abuse. Staff were able to tell us what kinds of abuse there were and how they would raise concerns if they suspected abuse.. If staff were concerned about the actions of a colleague there was a whistleblowing policy. The policy gave clear guidance as to how to raise concerns. This meant that staff could quickly and confidentially highlight any issues they had with the practice of others.

We looked at recruitment procedures in the service. The service provided assurances that all candidates for jobs completed an application form and underwent a formal interview with senior staff present. If they were successful criminal records checks were carried out and references sought. We saw staff records that confirmed this.

We looked at how the service managed medicines. The people who used the service lived in their own homes and therefore stored their own medication. The service was commissioned to provide support to some people with their medicines. Where this was the case we saw that medicines were managed appropriately.

We looked at how the service managed infection control. Staff were provided with adequate personal protective equipment and we saw this in use.

Is the service effective?

Our findings

We spoke with people who used the service and asked if they thought the staff knew how to support them properly. One person said, "They know their job." Another person added, "They know about us."

We spoke with staff and asked them if they felt well supported and appropriately trained. All staff told us that they were supported by the provider and the manager. The staff told us that they were given a wide variety of training. Two members of staff told us, "We did moving and handling training yesterday, so we were trying out new techniques today."

The manager told us, "I want staff to be happy, well trained and supported."

We looked at staff training records. We saw staff had completed training that the provider judged to be mandatory and had attended additional courses such as National Vocational Qualifications in social care. We noted that though some of the training was e-learning it was linked to a competency assessment in order to check that staff were competent in what they had learned.

We looked at supervision and appraisal records for staff. We saw the manager was carrying out supervision and appraisal sessions regularly and in accordance with the provider's in house policy. One member of staff told us, "We are well supported it's a great team here."

We examined how the service supported people to make their own decisions. People we spoke with lived as independently as possible at Monkway Court. We saw that the service supported people to continue living independently for as long as they were able. The service noted when people lacked capacity to make some decisions and acted in accordance with the Mental Capacity Act. For example if people were living with dementia staff ensured that other professionals and family members were involved in order to support people in making decisions in their best interests.

We spoke with people who used the service and asked if they were satisfied with the nutritional support they received. People told us, "The food is marvellous!"

We looked at how staff supported people to take adequate nutrition and hydration. We saw there was a privately owned restaurant within the building complex. Staff supported people to take good diet both within their own homes and at the restaurant if they wished. The restaurant was visited by many of the 27 people the service was supporting at the time of our inspection. This gave staff the opportunity to monitor people's food and fluid intake. In addition to this people had support plans in place if there were concerns around nutrition.

We saw from the written records the service regularly involved other health and social care professionals in people's care. This included members of the local district nursing team as well as GP's.

Is the service caring?

Our findings

We spoke with people who used the service and asked them if they thought the service provided good care. One person told us, "They are definitely wonderful." Another person added, "The carers are marvellous people."

We observed staff supporting people in a kind and caring way. Staff told us they knew the people who used the service well and had worked hard to build positive, caring relationships with people. Our observations confirmed this.

The manager told us, "As long as they [people who use the service] are happy, it's all I can ask for."

We saw that people and their relatives were encouraged by staff to express their views about their care and their likes and dislikes. Staff used this information to ensure that people were supported in a manner of their choosing.

The service ensured that people lived as independently as possible which was reflected in people's support plans. We observed people going about their day to day lives with appropriate levels of support to enable them to do so.

People told us that staff respected their rights to privacy and dignity. We observed staff ensuring that they knocked on people's doors before entering and spoke with people in a respectful manner.

We noted that the service had robust policies that referred to upholding people's privacy and dignity. They were able to provide support to both people who lived on their own and couples who lived together. In addition the service had policies in place relating to equality, this helped to ensure people were not discriminated against.

At times the service had supported people towards the end of their lives. We saw that staff had the appropriate skills to be able to do this and that they worked closely with the local district nurses to ensure that people were as comfortable as possible.

Is the service responsive?

Our findings

We asked people if they knew how to raise concerns about the service they received. People told us that they felt comfortable telling someone if they were unhappy about anything at Monkway Court. One person said, "I would talk to the people in charge." Another person added, "I have never had a complaint."

The service had a formal complaints policy and procedure. The procedure outlined what a person should expect if they made a complaint. There were clear guidelines as to how long it should take the service to respond to and resolve a complaint. The policy mentioned the use of advocates to help support people who found the process of making a complaint difficult. There was also a procedure to follow if the complainant was not satisfied with the outcome.

At the time of our inspection the service had no outstanding formal complaints. The manager explained that wherever possible they would attempt to resolve complaints informally. They added, "We respond quickly to any issues."

We looked at the written records of care for people who used the service. We saw evidence that indicated the service had carried out assessments to establish people's needs. People were assessed as to whether they needed support in all aspects of their life.

The underlying model of care was one of promoting people's independence. For example one person's needs had recently changed. The staff explained that they were working with adult social care and the housing provider to make adjustments to this person's home environment to ensure they were able to remain at Monkway Court. Staff told us, "We want [the person] to be as independent and as safe as possible." We were able to find evidence of other examples where the staff had worked hard to support people to maintain their independence.

We looked at the standard of care plans in the service. We found evidence that the service was formulating clear and concise care plans that were easy to understand. Staff had written daily notes that corresponded with people's plans of care.

People who used the service had access to their care plans because a copy was kept in their homes. Reviews of care plans were carried out regularly and involved the person receiving support, their relatives and health and social care professionals.

We looked at how people were provided with, or offered meaningful activities at Monkway Court. We saw that staff, in conjunction with the housing provider, often put on social events such as a 'St Patricks night' and were busy making plans for the Queen's forthcoming birthday. Staff had also provided equipment such as dominoes for the poor sighted to enable people to take part in board games or other social activities if they wished.

Is the service well-led?

Our findings

When we spoke with people who used the service they did not raise any issues to how the service was led. One person told us, "We know senior staff well." Another person added, "The manager has just started and I have not met her yet." With the permission of the person we spoke with we informed the manager and she rectified this straight away by visiting the person.

We spoke with staff during the inspection visit. They were complimentary about the leadership in the service and thought the manager and her senior staff had a team based approach.

The manager of this service told us, "I want to provide a service that gives everyone the opportunity to be as independent as possible for as long as possible."

We saw there was a clear management structure in place for this service. There were very experienced senior care staff who reported to the manager who in turn reported to the provider.

We saw evidence that questionnaires were sent to people who used the service. They were designed to seek the views of people and find out if they were satisfied with the service they received. The returned questionnaires were analysed and action plans created to address any issues highlighted. The manager gave an example of how people requested more indoor based exercise activities which had subsequently been provided in conjunction with the housing provider.

In addition to the questionnaires the manager, or senior staff, met with people who used the service both on a one to one basis and in twice yearly resident and relative meetings.

Audits and quality assurance checks were undertaken regularly. These included paperwork audits, training audit and spot checks on individual staff's performance. The outcomes of audits were analysed by the manager of the service who then used them to improve the way the service was run. The manager was able to show us some of the improvements that had been made. This included an improved office environment for the staff team.