







Leonard Cheshire Disability Riverview Community Support Service

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	

Overall summary

We carried out this announced inspection between 20 October 2016 and 22 January 2016. We last inspected this service in January 2014. At that inspection we found the service was meeting all of the regulations that we assessed.

Riverview Community Support Service provides personal care to people living in their own homes. The service is managed from offices close to the centre of Kendal. The agency provides domiciliary care to people living in the

South Lakes and Furness districts of Cumbria. The service supports children and adults of all ages who have a variety of care needs including due to illness, aging or disability.

The agency also provides a supported living service in Kendal. Supported living services involve a person living in their own home and receiving care and/or support in order to promote their independence. The care they receive is regulated by the Care Quality Commission, but the accommodation is not.

Summary of findings

There was a registered manager employed at the service. 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

People were safe receiving support from this service. They were protected against the risk of abuse and their rights were respected.

Safe systems were used when new staff were recruited to check that they were suitable to work in people's homes.

The staff were kind and caring and knew the people they supported well. People were included in decisions about their care and were supported to follow activities they enjoyed.

Staff received training to give them the skills and knowledge to meet people's needs. They felt well supported by the management team in the service and were confident to raise concerns on behalf of people who used the agency.

Medicines were managed safely and people received their medicines as their doctor had prescribed. Where people required support from staff to arrange health care appointments, this was provided.

The registered manager asked people for their views about the service and took action in response of the feedback received. The registered manager took prompt and appropriate action if people raised concerns about the support they received.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

People were protected against the risk of abuse and their rights were respected.

Robust checks were carried out on new staff to ensure they were suitable to work in people's homes.

Medicines were handled safely and people received the support they needed to take their medicines.

Good



Is the service effective?

The service was effective.

People were included in all decisions about their care and their rights were respected.

Care staff completed training to meet people's needs before working on their own in people's homes.

The registered manager was knowledgeable about the Mental Capacity Act 2005. Where people were not able to make important decisions about their support decisions were made in their best interests.

Good



Is the service caring?

The service was caring.

The staff were kind and friendly to people they were supporting.

People were supported to maintain their independence.

The registered manager was knowledgeable about local advocacy services that could be contacted to support people if they required.

Good



Is the service responsive?

The service was responsive.

People were included in planning and agreeing to the support they received.

The registered provider had a procedure for receiving and handling complaints about the service.

People knew how they could complain about the support they received.

Good



Is the service well-led?

The service was well-led.

The registered manager used the feedback from people who used the agency to improve the service provided.

The staff felt well supported by the management team in the service.

The registered manager was aware of her responsibilities and ensured action was taken in response to concerns raised.

Good



Riverview Community Support Service

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 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.

The inspection took place between 30 October 2015 and 22 January 2016 and was announced. We gave 24 hours' notice of our visit on 30 October 2015 because the location provides a domiciliary care service and we needed to be sure that the registered manager, or another senior person, would be available to speak with us.

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

At the time of our inspection the agency supported twenty people with their personal care. Before we visited the service we sent questionnaires to thirteen people who used the service and their families and to four health and social care professionals who had contact with the agency. We used the information from the returned questionnaires to plan our inspection.

During our inspection we spoke with five people who received support from the agency, three staff and the registered manager. We looked at the care records for six people who used the service, training records for three staff and recruitment records for two staff. We also looked at records relating to complaints and how the provider checked the quality of the service.

Before the inspection we reviewed the information we held about the service and contacted the local authority commissioning and social work teams for their views of the agency.

Is the service safe?

Our findings

People we spoke with said they felt safe with the care provided by this service. One person told us, “The staff help to keep me safe” and another person said, “I feel safe”.

People told us that most of the staff treated them in a way that respected their rights. One person told us that there had been one occasion when a staff member had not treated them well. They said they had told another staff member, who they trusted, and who then supported them to tell the registered manager about their concerns. They told us that the registered manager had taken prompt action in response to the concerns they raised. They said that this made them feel safe because they knew they could raise concerns and action would be taken by the registered manager.

Providers of health and social care services are required to notify the Care Quality Commission, (CQC), of all allegations of abuse. The registered manager had informed us of this incident and of the actions they had taken. We saw that the care staff and registered manager had promptly taken appropriate action to ensure that people who used the service were protected against the risk of harm.

All of the staff we spoke with told us that they had completed training in identifying and reporting abuse. They

showed that they knew the actions to take if they were concerned about a person they were supporting. All of the staff told us that they would not tolerate any form of abuse or ill treatment of people but would report any concerns to the registered manager.

People who required support with taking their medicines told us that they received this. They said the staff who visited them knew the support they needed and they received their medicines as their doctor had prescribed.

The care records we looked at showed that risks to people's safety had been identified and actions taken to manage any hazards. The care staff we spoke with told us they knew how to keep people safe because there was guidance in individuals' care records. We saw that the risk assessments were reviewed as the support people needed changed.

Everyone we asked said they were supported by a small team of staff who they knew and who knew the care they required. They told us that all the staff who visited them protected them from the risk of infection.

We looked at the recruitment records for three staff members. We saw that thorough checks had been carried out to ensure that new staff were suitable to work in people's homes. People could be confident that the staff who visited their homes had been recruited using safe procedures.

Is the service effective?

Our findings

People who used this service told us that the staff who supported them had the knowledge and skills to provide the care they required. One person told us, “The staff are brilliant”.

The care staff we spoke with told us they had to complete a range of training before they worked on their own in people’s homes. This was confirmed by the training records we looked at. We saw that a senior person in the service carried out checks on the care staff to provide them with support and to assess their competence. This helped to ensure the staff had the skills and knowledge to provide people’s care.

The registered manager of the agency had a very good understanding of their responsibilities under the Mental Capacity Act 2005. The 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 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. We checked whether the service was working within the principles of the MCA.

People we spoke with told us that they were included in planning and agreeing to the care they received. They said that the care staff asked what support they wanted and respected their decisions about their care. One person told

us that their support often had to change depending on how they were feeling at any particular time. They said that the staff understood this and “always” asked them what support they wanted.

The care staff we spoke with showed they understood people’s right to maintain control over their lives and to make decisions about their support. One staff member said, “We can advise people about their support, but it’s their life, we have to respect their choices”.

Some people who used the service were not able to make decisions about important aspects of their support. We saw that the focus was on supporting people as far as they were able to make decisions and where they were not able to do so records were kept of how decisions had been made in individuals best interests. This helped to ensure people’s rights were protected.

Some people who used the service required support from a range of specialist health services such as the Speak and Language Therapist. We saw that information from the specialist services that supported individuals was included in their care records so the care staff had appropriate guidance on how to support people.

People told us that if they required support to make health care appointments the staff provided this as they needed. We saw evidence of this during our inspection.

Most people told us that they did not require support from staff with making or eating their meals. One person said that sometimes, when they were unwell, they needed support with preparing meals. They told us that the staff provided the assistance they required.

Is the service caring?

Our findings

People told us that most of the staff who supported them were kind and caring. One person told us, “I like the staff, you can have a laugh with them”. People told us that they trusted the staff who worked in their homes.

During our inspection we saw many positive interactions between the support staff and people who used the agency. We saw that the staff were kind and friendly to people they were supporting.

One person told us that on one occasion a staff member had not been kind to them. They said they had reported this to another member of staff and action had been taken. This showed that people trusted the staff who worked with them and were able to confide any concerns in them.

People told us that the staff who supported them helped them to maintain their independence and control over their lives. One person said, “It’s important to me to be independent, the staff know that and don’t try to take over my life”. The care records we looked at included guidance for staff to support people to maintain their independence. We saw that the care plans instructed staff to ask people what support they wanted and to be guided by the individual. One person told us that their independence had increased due to the support they received.

People told us that the care staff knew them well and knew the things that were important to them. They said the staff helped them to maintain relationships that mattered to them. We saw that people’s personal care records included information for staff about how to support their wellbeing.

People told us that the care staff provided their support in a manner that helped them to feel comfortable and at ease. One person told us, “The staff are great, they don’t make you feel uncomfortable when you’re having to have care, that’s important”.

All the care staff we spoke with told us that they understood it was important to treat people with respect and to protect people’s dignity. One staff member told us, “You try to put people at their ease, it only takes little things to respect people’s dignity, little things but they’re really important”.

The registered manager was knowledgeable about local advocacy services that could be contacted to support people if they required. An advocate is a person who is independent of the service who can support people to make decisions about their lives or to raise concerns about their support.

Is the service responsive?

Our findings

Everyone we spoke with told us that they had been included in agreeing to the support they received from this service. Each person had a support plan that included information about the support they needed and how staff were to provide this. People told us that they had been included in developing and agreeing to their own support plans. We saw that people had also signed their support plans to show that they agreed to them.

We saw that the care plans were very detailed and gave staff information about how to support individuals. The support plans were written in a respectful and positive way, detailing how staff were to support people in a way that respected their independence and dignity. The support plans held information about the things that were important to people in their lives such as their families and pets. This made sure staff were knowledgeable about people's lives not just the care they required.

Care staff we spoke with told us that the care plans gave them the information they needed to provide people's support. We saw that the support plans were reviewed if people's needs changed to ensure they contained accurate and up to date information.

From our discussions with care staff we found that they were knowledgeable about the people they supported and the care they required.

Some people also received support from the agency to follow activities. They told us the staff who supported them knew the activities they enjoyed and helped them to attend as they chose.

The registered provider had a procedure for receiving and responding to complaints about the service. People told us that they knew how they could report a concern about the care they received. We saw that information about how to raise a complaint was also on the provider's web site. This included information about how people could report concerns directly to the registered provider if they did not wish to speak to the registered manager of the agency.

One person told us they had raised a concern and said that the registered manager had taken prompt and appropriate action to resolve their complaint.

Before our inspection we received one complaint about this service. We were told that the service was providing support that it was not registered to provide. We looked into this thoroughly and found that the service was not providing any support that it was not registered to and was working within the conditions of its registration.

Is the service well-led?

Our findings

People who used the service and the staff we spoke with told us that the service was well managed.

People who used the service told us that they were asked about their views of the service they received. They told us that, if they had raised a concern with the registered manager they were listened to and action was taken in response to their comments.

The registered provider gathered the feedback of people who used the service by asking them to complete a quality questionnaire. We saw that the registered manager had used the information gathered from the quality questionnaires to identify what the service was doing well and areas where the service could be improved.

We saw that some people who completed the questionnaires had stated that they were unsure about how to make a complaint about the care they received. The registered manager had provided people with information about how to raise complaints and at our inspection

everyone we asked told us they knew how to raise a concern about the service. This showed that the registered manager used the feedback from people who used the agency to improve the service provided.

All the staff we spoke with told us that they felt well supported. The registered manager was supported by team leaders who worked with staff to offer support and guidance.

The registered provider had a procedure in place that staff could follow to raise any concerns about the practice or behaviour of other staff members. One member of staff told us that they had reported a concern about the behaviour of one of their colleagues. They said that their concern had been investigated by the registered manager and they were happy that appropriate action had been taken. This showed us that the staff were confident to report concerns to protect people they supported.

Providers of health and social care services have to inform the Care Quality Commission, (CQC), about important events which happen in their services. The registered manager had notified us of significant events as required. This meant we could check appropriate action had been taken.