

Thistledown Supported Living Limited

# Thistledown Supported Living Ltd

## Inspection report

Brunel House  
Volunteer Way  
Faringdon  
SN7 7YR

Tel: 01367246004

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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

### About the service

Thistledown Supported Living is registered to provide personal care and support for five people sharing a house. Each person has their own tenancy agreement. A tenancy agreement states people's rights and responsibilities about their accommodation.

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

People told us they felt safe. Medicines were managed safely. Staff were recruited safely, and there were enough staff to take care of people. Support plans and risk assessments detailed what care and support people needed to reduce risk to them.

Staff received appropriate training, a plan was in place to ensure training was kept up to date. Staff were supported by the registered manager. People's needs were assessed, and outcomes recorded. People's choices were respected, including food and drink. The service worked with other health care professionals.

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.

People told us staff were kind and caring. People were supported to have choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems at the service supported this practice. People told us staff treated them with dignity and respect, they were involved with the planning of their care and their views were listened to.

There was a complaints procedure and people knew how to complain. People's likes, and dislikes were recorded in people's support plan and staff knew people and their preferences well. People's communication needs were in their plans. People had a good range of activities in place which they enjoyed.

The registered manager understood the regulatory requirements.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

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 them having as many opportunities as possible for them to gain new skills and become more independent.

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: This service was registered with us on 01/04/2019 and this was the first inspection.

Why we inspected: This was a planned inspection in line with our inspection methodology.

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?

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.

# Thistledown Supported Living Ltd

## **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 team consisted of one inspector.

#### Service and service type

This service provides care and support to people living in a 'supported living' arrangement in one house. 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.

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 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started on 5th March 2020. We also planned to visit people in their home but due to the coronavirus guidelines we were unable to visit the home in person.

#### What we did before the inspection

We reviewed information we had received about the service since they registered with the Care Quality Commission. The provider was not asked to complete a provider information return prior to this inspection.

This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with the registered manager and reviewed a range of records. This included one person's care record, and elements of two other people's care plans. We looked at one staff file in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We spoke with four people over the telephone who used the service about their experience of the care provided. We also spoke with a member of care staff. We contacted relatives for feedback and heard back from two. We sought feedback from the local authority and professionals who work with the service. We continued to seek clarification from the provider to validate evidence found. We looked at training data.

# 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 for 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 told us they felt safe. Comments included, "I really like it here; it is really nice, and I feel safe."
- Staff told us they felt happy raising any concerns they had about people they were supporting and were confident they would be dealt with appropriately. Staff received appropriate training in safeguarding and in other areas that keep people safe.

Assessing risk, safety monitoring and management

- Risks to people's safety and welfare were assessed.
- People's care files included appropriate assessment of risk, which had been conducted in relation to their support needs.
- Assessments were individual and personalised to each person. Staff were aware of the risks to people they supported and there was a culture of encouraging positive risk taking.
- Care plans provided instructions to staff to reduce the likelihood of harm to people when being supported.

Staffing and recruitment

- There were enough staff to ensure people received safe care.
- Safe recruitment procedures were in place to ensure only staff suitable to work in the caring profession were employed.

Using medicines safely

- Medicines were managed safely. People told us they got their medicines when they needed them.
- A member of staff told us, "We are kept up to date with our training."
- Staff received face to face and practical training in the safe management of medicines. Staff had their competency checked annually. Records showed staff were up to date with medicines training.

Preventing and controlling infection

- Appropriate measures were in place to protect people from infection.
- Staff confirmed they had access to personal protective equipment.

Learning lessons when things go wrong

- The registered manager had a system in place to monitor accidents and incidents. They understood how to use accidents and incidents as learning opportunities to try and prevent future re-occurrences.

# 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

- People's needs were assessed before being offered a service. The information gathered during the assessment was used to develop care plans and risk assessments. They clearly described the support required and contained person-centred information.

Staff support: induction, training, skills and experience

- The registered manager constantly reviewed how best to support staff. At the time of the inspection staff had formal one to one meetings with the registered manager quarterly. However, the registered manager was available at all times for advice.
- Staff told us they felt supported in their roles. A member of staff said, "I can get hold of the [registered manager] at any time and he always responds. Feel very supported."
- Staff were trained to be able to provide effective care. One staff member told us, "I have undertaken training. You can never do enough as we have to keep up to date."

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

- People were fully involved in planning, shopping, and cooking their meals. One person described that they enjoyed shopping and were enabled to do this.
- The service had obtained easy read cook books with recipes linked to shopping lists. The registered manager told us people were involved in cooking meals where they wanted and helping with tasks in the kitchen. We saw pictures of people enjoying making pancakes.
- Care records identified specific dietary needs and staff ensured these were met.

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

- One person told us, "I get help to see doctors if I need to. I went to see a dentist not long ago." A relative said, "His medication is given by the staff and he has been to the dentist and signed up with a medical practice."
- Hospital passports were in place to support effective transition between services. This meant key information was available on people's needs should they be admitted to hospital.
- Information was shared with other agencies if people needed to access other services such as GPs, health and social services.

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 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager understood the need to include any conditions in the care planning process to demonstrate they had been met.
- Staff received training to ensure they understood the principles of the MCA. A member of staff confirmed their understanding and a person said, "I get to choose things that I want to do."

# 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 told us they received good care and support from staff. People told us, "They keep me out of mischief!" and "They treat us all really nicely. I love living here." A relative said, "[Person] settled in very quickly and is now friendly with staff and the other clients."
- Staff we spoke with were positive about their role. One staff member told us, "It's a brilliant place to work. People here have a great life."
- The service was caring and focused on ensuring people received person-centred care. It was evident staff knew people well and put these values into practice. A relative said, "All in all we have one very happy [person]."

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

- People told us staff listened to their views and they were involved in making decisions about their care and support, as far as possible.
- The registered manager and staff we spoke with demonstrated a good knowledge of people's personalities, individual needs and what was important to them.
- When people had expressed their views about their preferences these were respected.

Respecting and promoting people's privacy, dignity and independence

- The service promoted people to live as independently as possible. People were supported in certain aspects of their day to day activities which encouraged people to maintain their independence. For example, the registered manager gave us examples about how people were supported in employment, such as gardening.
- People were supported to do as much independently as they could. One person said, "I get help to get the train home to see my parents. Staff help me get to the station and then I do the rest on my own which I like."
- People were encouraged to do as many of their personal care tasks as possible to maintain their dignity, privacy and independence. A relative commented, "Since [person] has been there, with the encouragement from the staff, his hygiene has improved, and his room is kept tidy."

# 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

- People were at the centre of their care and support. The support plans we reviewed were detailed and contained information about people's likes, dislikes, specific needs, their personal preferences, routines and how staff should best support them to live happy, contented lives.
- Staff were knowledgeable about people's preferences and could explain how they supported people in line with this information.

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.

- People's communication needs had been assessed. Information was available in a format that people understood. This included the tenancy agreements, hospital passport and complaints information.

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

- The service was responsive to people's social needs, and actively promoted the importance of social contact and companionship to enable a good quality life.
- One person told us, "I do sports on a Monday." We heard that three of the people who had trained in gardening at college now worked with a service to provide a gardening service to the public.
- People also attended drama classes, badminton club, special Olympics training.
- People celebrated their birthdays in different ways. One person recently had a 'special' birthday celebration and staff worked with the person and their family to organise a party at the person's favourite pub. Lots of family members and all the staff attended.
- People were supported to keep in touch with their families. A relative said, "We visit on a regular basis and are always made welcome by the staff." Due to the coronavirus outbreak, the staff ensured people maintained contact with their families via Skype calls and other forms of contact.

Improving care quality in response to complaints or concerns

- There were systems and procedures in place in relation to complaints. The service had not received any complaints but had received several compliments.
- People who used the service told us they knew how to complain if they were unhappy. A relative said, "No concerns. If we had any we'd refer to [registered manager]."

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

- People were positive about the registered manager who delivered care on a regular basis. They clearly had a good relationship with him in the way they spoke and joked with him.
- There was a consistent staff team who worked closely together resulting in effective communication. The staff member we spoke with confirmed that she was always kept up to date and communication was very good.
- Staff meetings were often used for group supervisions. It was found reflection was helpful in these meetings to bring about suggestions in problem solving any particular issues.
- The registered manager had recently sent out some surveys to seek feedback but had not received any responses at the time of the inspection. The registered manager was also reflecting on how to get meaningful and continuous feedback from people in the service.
- People who used the service were involved in day to day decisions about what they wanted to eat and what social activities they wanted to take part in.
- The registered manager and staff team made themselves easily available to people using the service, relatives and staff. A relative said, "Communication is very good."

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 requirements to notify CQC of all incidents of concern, including serious injuries, deaths and safeguarding alerts.
- The registered manager understood their role and responsibilities in relation to the duty of candour. This is a set of expectations about being open and transparent when things go wrong.

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

- Quality monitoring systems were in place to provide an oversight of the service.
- There was a registered manager in post who provided leadership and support. The registered manager was open and committed to making a difference to the lives of people living at the service.
- People who used the service received good quality person centred care.

Continuous learning and improving care

- The registered manager understood their legal requirements. They were open to change, keen to listen to other professionals and seek advice when necessary.
- The registered manager demonstrated an open and positive approach to learning and development.

#### Working in partnership with others

- The service worked in partnership with key organisations to support care provision, service development and joined-up care. For example, the registered manager told us the local authority had approached them to act as a mentor for other providers considering offering a supported living service.