

St Anne's Community Services

St Anne's Community Services - Ripon Community House

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

St Anne's Community Services – Ripon Community House provides support to people living within the Harrogate and Ripon area. They provide an 'outreach' service to people living in their own homes as well as care and support to be living in a 'supported living' setting, 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.

The support provided may include assistance with personal care, support with meals or accessing the community. The service provides support to both younger and older adults (aged 65 and above). At the time of our inspection, the service supported nine people who may be living with a learning disability or have autistic spectrum disorder.

We inspected the service on 22 November and 6 December 2017. This was an announced inspection and we gave the provider 48 hours' notice of the visit, because it was a small service and we needed to be sure people would be in.

Following our last inspection, the service was awarded a rating of Good. At this inspection, we found the service remained Good.

There were two managers in post who had registered with CQC. They assisted throughout the inspection.

The people supported by the service said they felt safe. The provider had safeguarding policies and procedures in place. Staff understood their responsibility to report any concerns and how they would do this. We found suitable levels of staff were in place to meet people's needs and people received support from a consistent staff team. Staff continued to be recruited in a safe manner and had an induction process to ensure their competence.

We saw the service tried to promote people's safety and considered how risks could be addressed. Medication was stored and administered safely. We spoke with the registered managers about the recording of prescribed creams.

The registered managers provided on-going support to staff in the form of supervisions, appraisals and team meetings. Staff received training in key areas and the registered manager completed regular observations of people's practice to assess their skills and competence.

Where needed, people were supported to maintain a balanced diet. We received positive feedback about the staff from people supported by the service and their relatives. We observed staff had a rapport with people and understood their needs and abilities. Staff respected people's privacy and care was provided in a kind and compassionate manner.

We reviewed care records relating to people supported by the service. Records were person-centred and made reference to people's preferences, their abilities and the support they required. The support being provided was reviewed to ensure it continued to meet people's needs and supported their aspirations.

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

People gave us positive feedback about the registered managers. The registered managers and provider had systems in place to monitor the quality of the service. People were given the opportunity to feedback about the quality of care they received. We saw the registered managers responded in a timely manner to concerns raised.

Further information is in the detailed findings below.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

St Anne's Community Services - Ripon Community House

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.

This comprehensive inspection took place on 22 November and 6 December 2017. This inspection was announced and we gave the provider 48 hours' notice of the inspection visit because it was a small service and we needed to be sure the registered managers and people using the service would be in. The inspection team was made up of two inspectors who attended both days.

We undertook a visit to both the office and supported living accommodation. We were given a tour of the facilities and, with people's permissions, looked in their bedrooms. We also observed staff interactions with one another and with the people supported by the service.

We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed information we had about the service including notifications. The provider is legally required to send us notifications with regards to any changes in the organisation or significant incidents and events. We also contacted the local authority commissioning group and Healthwatch, a consumer group who aim to share the views and experiences of people using health and social care services in England. This information was included within our planning of the inspection.

During the inspection, we spoke with three people supported by the service and two relatives. We reviewed documentation relating to four people including risk assessments, care plans and reviews.

We considered information in relation to the running of the service including staff rotas, compliments and complaints and accidents and incidents. We spoke with two members of staff and both registered managers. We reviewed files for three members of staff.

Is the service safe?

Our findings

At the last inspection, we found the service was safe and awarded a rating of Good. At this inspection, we found the service continued to be safe.

When we asked a person, supported by the service, whether they felt safe they responded, "I am. I'm happy here." Relatives told us the people they supported did not express concern about returning to the service. Through our observations we found people were relaxed with staff and talked at ease about their day's activities and the support they required.

On the day of our inspection there was sufficient staff to support people. The staff rotas we saw showed staffing levels were consistent and that effort was made for people to have the same staff supporting them. One relative commented, "There is consistency in the staff who are working there. Quite a few have worked there a long time." A person told us they had the support they needed and said, "I do not feel rushed." People explained they were informed of any changes to the rotas and the registered managers advised rotas were available in large print if required.

We saw the provider continued to recruit people in a safe manner with all relevant pre-employment checks being completed before employment commenced.

Medication support was provided to people who lived in the supported living accommodation, but not by the outreach service. Records showed people received their medication as prescribed. We found topical medicines, such as creams did not always clearly state where the cream should be administered. We discussed this with the registered managers, who told us they would address this.

Staff had completed medication training and observations of staff's practice when administering medication had also taken place. Staff told us they did not administer medication until the registered managers had assessed their competency.

There was a safeguarding and whistleblowing policy in place and this was on display. An 'Easy Read' version of the safeguarding policy had also been produced. Staff completed training and had a clear understanding of safeguarding, the potential signs of abuse and how to report any concerns.

We saw aprons and gloves were available for staff to wear which can help to reduce the spread of infection.

Where risks had been identified for people, risk assessments were completed. We found people's care plans and risk assessments had been updated when there had been a change in their needs. The service had recently completed a fire drill. People had personal emergency evacuation plans in place to ensure staff were aware of the support they require should there be an emergency.

When an accident or incident had occurred we saw that the registered managers considered actions that needed to be taken and any lessons they could learn. This was then discussed with their staff team.

Is the service effective?

Our findings

At the last inspection, we found the service was effective and awarded a rating of Good. At this inspection, we found the service continued to be effective.

We walked around the service and found it was clean, warm and comfortable. With permission, we looked in people's bedrooms and found these were personalised, with photographs and pictures on the walls, and people had decorated their bedrooms with their own furnishings

When asked whether staff were sufficiently trained and knowledgeable a person responded, "Definitely, they're very good." Through our observations and discussions with staff we found them to be knowledgeable and skilful in their interactions with people. A staff member from this service recently received an 'employee of the month' award for St Anne's Community Services due to their commitment to promoting people's skills.

Staff were supported through regular supervisions and annual appraisals. Appraisals provide an opportunity to discuss the staff member's performance, learning and development needs, and well-being in addition to any other important issues. Staff completed training the provider considered to be mandatory which included health and safety, safeguarding adults, emergency first aid and fire training. The registered managers had a system in place to monitor the training staff completed. New members of staff also completed an induction and their progress was monitored through probationary meetings.

People were supported to maintain their food and fluid intake and their preferences were recorded within their care plans. People confirmed they were involved in deciding what to eat. Whilst visiting the service a meal of cottage pie was being cooked and we heard people being given choice about what they wanted for their lunch. People in the supported accommodation told us they often went out for Sunday lunch together.

People were supported to make and attend health appointments. We saw referrals had been made to occupational therapists, physiotherapists and speech and language therapists. Their visits and the advice given was recorded within people's assessments and care plans and their advice followed. This demonstrated staff supported people to maintain optimum health and well-being.

We checked whether the service was working within the principles of the Mental Capacity Act 2005 and found these principles were promoted. People were actively included in discussions about their care. We found written consent, to the contents of people's care plans, were in place within the outreach service and we discussed the benefit of applying this across both locations. We saw capacity assessments and best interest decisions had been completed and the support provided was in the least restrictive way.

Is the service caring?

Our findings

At the last inspection, we found the service was caring and awarded a rating of 'Good'. At this inspection, we found the service remained good.

We received positive feedback about staff. A relative commented, "All the carers put in a lot of time and effort for it to feel like home" they went on to say "each person has their say." Another relative commented, "[The person] absolutely adores them" and described the staff team as "attentive." Relatives also described the emotional support and reassurance staff gave to people if they were upset or distressed.

We observed positive interactions throughout the day; staff spoke with people in a respectful manner and the people supported by the service were at ease around staff. Staff had an understanding of how to promote people's dignity and privacy; we observed staff knock on people's door and close doors when personal care support was being provided. Staff spoke about the people they supported with warmth and affection. We asked one member of staff what was the best thing about their job and they replied "the people."

People's assessments and care plans also described their abilities alongside their support needs. We saw people were encouraged to be a part of daily living tasks such as cleaning their room or doing the laundry. The registered manager discussed a referral made to the occupational therapist to assess for a different style of door which would enable somebody to open a door independently as opposed to staff doing this. This showed us that the staff and registered managers wanted to promote people's independence and encouraged them to use their skills.

The registered managers showed us staff had access to a range of literature and information in relation to key equality and diversity issues. The provider has an intranet page where there were links to a range of organisations offering advice and support around topics such as sexuality and supporting people from the travelling community. This demonstrated the provider noted the importance of understanding people's diverse needs when providing support.

There was access to information about advocacy services, which are independent services supporting people to make decisions about their lives. At the time of our inspection, none of the people were supported by formal advocacy services, but many had support from their relatives.

Is the service responsive?

Our findings

At our last inspection, we found the service was responsive and awarded a rating of Good. At this inspection, we found the service continued to be responsive.

When asked whether the support provided was person-centred, one member of staff stated, "Very much so. We look at people as individuals who need to be living their lives as they want."

Assessments and care plans were completed for the people supported by the service. The documentation we reviewed was person-centred and detailed. People's likes, dislikes and aspirations were described and these were reviewed on a monthly basis. The registered managers assigned each person a 'key worker' who was responsible for reviewing the support in place and following-up on any issues or changes for the person. The staff we spoke with were really positive about the role of key worker and the rapport this enabled them to establish.

People's care plans noted the relationships that were important to the individual and the support they required to maintain these. A relative explained to us that staff provided support with buying presents and sending cards. Visitors described always feeling welcome when they visited the service.

Staff completed daily records which detailed the support people were provided with. We found the majority of daily records were completed thoroughly. The level of detail sometimes varied and we discussed this with the registered managers who agreed to address this. Staff communicated any issues or concerns to one another utilising different methods including emailing one another, using a communication book and also having a verbal handover. We found this was an effective system as staff had an understanding of people's current needs and the documentation showed that when issues or concerns had been raised these were addressed.

People were supported to engage in the community and activities of their choosing. Staff supported people to attend day centres, social events including tea dances, visit different cities and to go out for Sunday lunch. During our inspection, three of the five people within the supported accommodation were out doing different activities including shopping for their holiday. If there was an activity which somebody wanted to do, staff would try to accommodate for this. This showed us people had active lives and had the opportunity to socialise and maintain relationships.

At the time of our inspection, no formal complaints were been investigated. However, when informal concerns had been raised with the registered managers these were documented and actions taken to remedy the concerns were recorded. The registered managers had an understanding of the complaints policy and timescales to respond to any concerns. The people supported by the service also knew who to speak with if they had any concerns. A relative stated, "I would have no qualms in contacting [the registered manager]."

Is the service well-led?

Our findings

At the last inspection, we found this service was well-led and awarded a rating of Good. At this inspection, we found the service continued to be well-led.

The service had two registered managers; one manager took responsibility for outreach work, whilst the other manager was based with the supported living accommodation.

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.

A relative described the registered managers as "very approachable". A member of staff described them as "very supportive" and explained they felt confident to raise any concerns. Without exception we received positive feedback about the management support.

Throughout our inspection process we found the registered managers were transparent with us and we had discussions throughout. We reviewed records related to the running of the service and found these were well maintained. The registered managers demonstrated an overarching understanding of the people who were supported by the service.

Satisfaction surveys were produced in an easy read format to enable people's full participation. The survey had a traffic light system, with green meaning the service was good and red that the service was not good. Of the 16 responses received, 14 said the service was good. The registered managers completed an analysis of the surveys, developed actions plans and completed follow-up work including referrals to other services. This demonstrated the registered managers listened to the feedback and acted on suggestions made by the people supported by the service.

Staff confirmed they had regular team meetings. Topics discussed included the health and welfare of people who used the service, learning and development needs and any matters staff wished to discuss. Staff meetings were also an opportunity to discuss any organisational updates to ensure staff were aware of any changes. The team also produced a team action plan which was regularly reviewed.

Regular audits in line with organisational policy were completed. This included audits by the registered managers, managers from other services and the area manager. We saw issues highlighted through the audit process were addressed. For example, it had been noted that creams had not been labelled with their date of opening. At the inspection, creams were clearly labelled. This demonstrated the management had appropriate quality assurance systems in place to ensure issues were highlighted and addressed in order to provide people with a good standard of care.