

## Northumberland County Council

# Northumberland Supported Living 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 ●

# Summary of findings

## Overall summary

About the service: Northumberland Supported Living Service provides care and support for up to two people living in a 'supported living' setting. At the time of this inspection one person was using the service.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

Nurses who are employed by Northumbria Healthcare NHS Foundation Trust also work with the people at the service 24 hours a day. The service had operated in this manner for over 12 years and followed an integrated care model.

People's experience of using this service: The person looked very comfortable and at home in their surroundings. Staff had worked very closely and sensitively with the person to support them to accept more contact with other people and experience a wider range of activities. Staff were friendly and very skilled at working with the person. Most had worked at the service for a long time. The person and staff knew each other very well and they looked at ease in each other's company.

Staff were well trained and knowledgeable about their roles and the care people needed. Feedback highlighted how the person's life had improved since they moved to the service.

Systems and processes were in place and well monitored so the service was safe and run well. Nurses managed all aspects of medicine administration. The registered manager and staff had robust risk assessments and acted appropriately to mitigate any identified risks.

People's rights were upheld. The person was given choice and supported to make decisions. Where people did not have capacity to make decisions, they were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

Staff effectively reported any safeguarding matters. The registered manager thoroughly investigated any concerns, and resolved these matters. All incidents were critically analysed, lessons were learnt and embedded into practice.

The service was well run. Staff told us the registered manager was fair, and good at listening to people and staff thoughts about how to make the service better. The registered manager carried out lots of checks to make sure that the service was delivering a good service.

Rating at last inspection: Good (Report published on 3 June 2016).

Why we inspected: This was a planned inspection. It was scheduled based on the previous rating.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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?**

The service was safe.

Details are in our Safe findings below.

**Good** ●

### **Is the service effective?**

The service was effective.

Details are in our Effective findings below.

**Good** ●

### **Is the service caring?**

The service was caring.

Details are in our Caring findings below.

**Good** ●

### **Is the service responsive?**

The service was responsive

Details are in our Responsive findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our Well-Led findings below.

**Good** ●

# Northumberland Supported Living Service

## **Detailed findings**

### Background to this inspection

**The 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 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.

**Inspection team:** One adult social care inspector completed this inspection.

**Service and service type:** Northumberland Supported Living Service provides care and support to up to two people 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 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 24 hours' notice of the inspection visit because it is small and people are often out. We needed to be sure that they would be in.

**What we did:** We reviewed information we had received about the service to plan the inspection. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service. We assessed the 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.

**During the inspection:** We met the person who used the service and observed the interaction between them and their staff team. We also spoke with the registered manager, a nurse and three support workers who

were on duty at the time of our inspection.

We reviewed a range of records. This included the persons care and medication records, various records related to recruitment, staff training and supervision and the management of the service.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm.

Good: People were safe and protected from avoidable harm. Legal requirements were met.

### Systems and processes

- The registered manager critically reviewed all aspects of the service and determined if improvements were needed.
- We saw the provider had robust procedures in place to ensure future recruitment was safe.

### Assessing risk, safety monitoring and management

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained detailed explanations of the control measures for staff to follow to keep people safe. The records used to monitor those risks such as for hydration, nutrition and working with people when they displayed behaviours that may challenge were well maintained.
- The environment and equipment was safe and well maintained. Emergency plans were in place to ensure people were supported in the event of a fire.

### Staffing levels

- The person had a dedicated staff team of support workers. Three support workers were on duty each day and a support worker was on duty overnight. Nurses employed by Northumbria Healthcare NHS Foundation Trust were also on duty at the service during the day and night. The registered manager made sure there were always sufficient staff on duty to meet the person's needs.

### Safeguarding systems and processes

- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate and effective training in this topic area."

### Using medicines safely

- The nurses managed all of the medicines and these were safely received, stored, administered and destroyed.

### Preventing and controlling infection

- Staff had received infection control training and said they had plenty of personal protective equipment (PPE) available to them.

### Learning lessons when things go wrong

- The registered manager critically reviewed all incidents and ensured staff considered how lessons could be learnt. For example, the staff had reviewed how falls were managed for one person who had used the service up until recently. Following a review, they had put new processes in place, which had led to a significant

reduction in the number of falls this person experienced.



# Is the service effective?

## Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

Good: 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

- The provider had developed an in-depth assessment tool. The registered manager and staff ensured extremely detailed assessments were completed and these informed all of the care plans.
- Care plans were detailed. They had been kept up to date when people's needs had changed.
- The registered manager actively sought out information on current best practice and standards. They shared this with staff and made sure current guidance was followed.

Staff skills, knowledge and experience

- Staff had the skills and experience to support people. They received a programme of training, delivered through E-learning and face-to-face. Staff's understanding and skills were checked through knowledge and practical tests. One support worker said, "The training is second to none."
- Staff had regular supervision and appraisals.
- The registered manager had a good system to understand which staff needed their training to be refreshed and who required supervision. Staff told us they felt supported.

Supporting people to eat and drink enough with choice in a balanced diet

- The person needed staff to make all their meals. We found staff were very knowledgeable and understood how to provide healthy balanced meals.
- Staff encouraged the person to become more involved in meal preparation and they had recently started going to the kitchen to pick up their meal. Staff and relatives found this was a significant step for the person.
- A MUST tool was used, which assists staff to monitor whether people's weight was within healthy ranges. The tool supported staff to accurately identify if people were at risk of weight loss.

Staff providing consistent, effective, timely care within and across organisations

- The registered manager and staff made sure the service met the person's needs. One support worker said, "We know [person's name] really well and can spot the slightest change in their presentation." The same group of staff continuously supported the person and rotas confirmed this.

Supporting people to live healthier lives, access healthcare services and support

- The service worked well with other organisations. The person received the care they needed when they needed it. Staff closely monitored people's health and contacted doctors and other healthcare professionals appropriately.

Ensuring consent to care and treatment in line with law and guidance

- We checked whether the service was working within the principles of The Mental Capacity Act 2005 (MCA), whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- The registered manager and staff followed all the principles and guidance related to MCA and Deprivation of Liberty Safeguards (DoLS) authorisations.

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- Feedback from relatives highlighted that they found the staff were consistently kind and caring.
- We observed staff and found they worked very closely and sensitively with the person. The registered manager and staff reported that they adapted their responses and working practices to support the person to accept more contact with other people and experience a wider range of activities.
- We observed that staff were friendly and very skilled at working with the person. Most had worked at the service for a long time. The person and staff knew each other very well and they looked at ease in each other's company.
- The registered manager told us how they supported people's human rights and promoted equality and diversity. They actively promoted people's rights and made sure staff treated people in a person-centred manner.

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

- Staff showed genuine concern for people's wellbeing. It was evident from discussions that all staff knew the person very well and understood their communication methods. We found that staff worked in a variety of ways to ensure people received care and support that suited their needs. The person was encouraged to remain as independent as possible.
- Staff supported people to make decisions about their care. They understood how the person communicated their wants and needs, this was documented in care plans.
- We saw that information about advocacy services was available, and when needed, the staff enabled people to access these services. Advocates help to ensure that people's views and preferences are heard where they are unable to articulate and express their own views.

Respecting and promoting people's privacy, dignity and independence

- The staff explained how they maintained the privacy and dignity of the person they cared for and told us that this was a fundamental part of their role.
- Staff helped people to feel more confident doing things for themselves. Staff helped the person to experience a wider range of activities. They had worked with a local café to make it possible for the person to regularly visit and become more comfortable dealing with people.
- We observed the staff team worked well together and with the person. Staff consistently engaged the person in conversations and we heard lots of laughter throughout the visits. We found there was a calm relaxed atmosphere within the service.

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs.

Good: People's needs were met through good organisation and delivery.

How people's needs are met

- We observed that the person was consistently supported to express their opinions about what was on offer and given choices about all aspects of their care and treatment.
- The registered manager and staff told us about the activities the person engaged in both outside and within the home. This was extensive and we heard from the registered manager that relatives had been surprised by how much the person had developed. Relatives comments included, "I had thought this would break down in six weeks but over 12 years later they are still successfully living in the community. We are amazed by the things they now do and never thought it was possible."

Personalised care

- Care plans contained extremely personalised information such as how to determine if a person was becoming distressed and how to support them with the negative impact of these experiences.
- People's needs were identified, including those related to equality and their choices and preferences were regularly reviewed. Reasonable adjustments were made where appropriate and the service identified, recorded, shared information and communication needs of people, as required by the Accessible Information Standard.

Improving care quality in response to complaints or concerns

- People had access to information on how to make a complaint.
- Systems were in place to ensure complaints were acknowledged, investigated and responded to by the registered manager. No concerns or complaints had been raised over the last five years.

End of life care and support

- People were sensitively supported to make decisions at the end of life care. Professionals were involved as appropriate.
- Staff understood people's needs, were aware of good practice and guidance in end of life care, and respected people's religious beliefs and preferences.
- The service provided specialist equipment and medicines at short notice to ensure people were comfortable and pain free.
- The service supported people's relatives and friends as well as staff, before and after a person passed away.

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Leadership and management

- Feedback from relatives and staff highlighted that the registered manager and senior managers were extremely effective and operated a service that consistently strived to be excellent.
- The registered manager and the culture they created effectively supported the delivery of high-quality, person-centred care.
- A staff member commented, "I have worked in other care services but this is the absolutely best place I have ever been. We all work well as a team and the manager is fantastic."

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- Staff told us they felt listened to and that the registered manager was approachable. Staff understood the provider's vision for the service and they told us they worked as a team to deliver high standards. Feedback from relatives confirmed that they felt listened to and integral to the service development.
- Staff felt the manager closely listened to their views, took their comments on board and then, if appropriate implemented their suggested changes.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The service was well-run. People at all levels understood their roles, responsibilities and their accountability. They were held to account for their performance where required.

Engaging and involving people using the service, the public and staff

- The provider and registered manager positively encouraged feedback and acted on it to continuously improve the service. For example, by looking at how to work with the local community to extend people's access to local resources such as cafés.

Continuous learning and improving care

- The quality assurance system included lots of checks carried out by staff, the registered manager and the regional manager. The registered manager critically reviewed the findings from the various audits and tools to identify where improvements could be made. Following any change to practice the registered manager then reviewed these to determine if the alterations were having a positive impact for people who used the service.
- A culture of continuous learning meant staff objectives focused on driving improvement and providing a high standard of care.

#### Working in partnership with others

- People, relatives and visiting professionals had completed a survey of their views and the feedback had been used to improve the service.