

Care Management Group Limited Care Management Group -37 Lewes Road

Inspection report

37 Lewes Road Eastbourne East Sussex BN21 2BU Date of inspection visit: 17 November 2016

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Ratings

Overall rating for this service

Good

Is the service safe?	Good •
Is the service effective?	Good $lacksquare$
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

The inspection took place on 17 November 2016 and was announced.

37 Lewes Road is registered to provide supported living accommodation for up to ten people who live with complex learning disabilities. There were ten people living at 37 Lewes road at the time of this inspection.

The home had a registered manager. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

When we last inspected the service on 22 November 2013 we found the service was meeting all the required standards. At this inspection we found that the service continued to meet the regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

People felt safe living at 37 Lewes Road. Staff demonstrated they knew how to keep people safe and risks to people's health and safety were assessed and where possible risks were mitigated to help keep people safe. People's needs were met in a timely way by sufficient numbers of staff who were experienced and had the skills to meet people's needs effectively. The provider had a robust recruitment processes which helped to make sure that potential staff were suited to work in a supported home environment. People were supported to take their medicines and there were checks in place to make sure staff worked in a way which supported good practice.

Staff were supported through individual supervision meetings with their line manager and told us they were well supported and felt valued and motivated. People received support to eat and drink a varied diet with sufficient amounts to maintain their health and wellbeing. People were supported to access a range of healthcare professionals including GP's, Hospital appointments and dental health care was maintained.

People were very positive about the staff and management team who they said were extremely caring and supportive. Staff knew people's individuals' care and support requirements and routines very well and people were involved in the development and review of their care and support plans as much as they could.

The provider had systems and processes in place to receive feedback about the service from people who used the service, their family members and staff. There was a complaints policy in place however no complaints had been made. People told us they discussed anything that concerned them and things were resolved.

The managers and staff worked in a way that supported an open and transparent approach and people were central to everything at the service. People knew the manager and spoke with them regularly. The provider had systems in place to monitor the quality of the care and support provided at the service and was

keen to make continual improvements.

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.	
Staff were aware of potential abuse and how to report any concerns.	
There were adequate staff on duty at all times to meet peoples needs safely.	
People were supported by staff who had been recruited via a robust recruitment process.	
People's medicines were managed safely.	
Is the service effective?	Good ●
The service was effective.	
People received support from staff who received training and support.	
Staff obtained people's consent before supporting them.	
People were assisted to eat and drink sufficient amounts to maintain their health.	
People were supported to access a range of health care professionals when required.	
Is the service caring?	Good 🔍
The service was caring.	
People were treated in a kind, caring and compassionate way.	
Staff knew peoples needs and wishes well and supported them accordingly.	
People's dignity and privacy was promoted and respected.	
Is the service responsive?	Good ●

The service was responsive.	
People participated in hobbies and activities that were of interest to them both at the service and in the community.	
People were involved in decisions about their care where possible.	
Feedback was obtained in order to support continual improvements and people were listened to.	
Is the service well-led?	Good
The service was well-led.	
The service was well-led. People were positive about the overall management of the home.	
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Care Management Group -37 Lewes Road

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 inspection took place on 17 November 2016 and was announced. The inspection was undertaken by one inspector.

Before our inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us. We also reviewed the provider information return (PIR). This is information that the provider is required to send to us, which gives us some key information about the service and tells us what the service does well and any improvements they plan to make.

During the inspection we observed staff support people who used the service. We spoke with three people who used the service, three staff members, and the registered manager.

We also used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed care records relating to three people who used the service, two recruitment files and other documents relevant to people's health and well-being. These included staff training and support records, medication records and audits and quality monitoring systems and processes.

Our findings

People who used the service told us they felt safe living at Lewes road. One person said "I have my own space, but all the support I need to keep me safe". People who used the service told us they felt the staff met their needs safely. Another person told us, "I feel safe here, the staff are good and I always let them know where I am going and what time I expect to be back home".

Staff told us they tried to promote people's independence and gave people information to enable them to make 'informed decisions' about their lifestyles. This enabled people to take risks if they wanted to. For example one person who went travelling alone was assisted to consider the potential risks in the community as well as travelling alone. The person was supported to plan their trips to reduce risks and deal with situations if they occurred.

Staff received training in how to protect people from harm and they were aware of how to report any concerns internally and externally. We saw that information was displayed both in the office and on the notice boards in the communal areas so that everyone could access the information when required. Contact numbers for local safeguarding authorities and the CQC were displayed both on notice boards. This meant that people, staff or visitors had access to the information if they needed to report any concerns.

People told us there were enough staff on duty to support people at all times. One person told us, "There are always plenty of staff here". Another person told us "Even if they are busy helping another person, they will come to help me after when they are free. You never have to wait long at all". The staff rotas confirmed that there was adequate staff deployed including evenings and weekends. We observed staff assisted people in an unhurried way and at a pace that suited the person they were supporting.

Staff confirmed they felt there were enough of them on duty. On the day of our inspection we noted there was an agency member of staff on duty and the manager told us when they used agency staff to support shifts they always ensured there were enough permanent and experienced staff available to provide support them. Where agency staff were required they always requested the same staff so they could build rapport and consistency with the people they supported. We saw that staff rota`s were planned in advance and ensured that all the shifts were covered.

Safe and effective recruitment practices were followed to make sure that all staff were suitable to work in a care setting such as supported living, and also that they were suitable to support people who lived at the service. Potential staff were interviewed and people who used the service where involved in the recruitment and selection process. The manager told us and records confirmed that all necessary pre-employment and identity checks were done before staff commenced work. These included a criminal records bureau check (CRB) and the taking up of references, along with proof of address and ID. These checks helped to make sure people were kept safe.

Risks to people`s health and well-being were identified and kept under regular review to make sure that risks were managed to help keep people safe. We saw for example, there were risk assessments in place for

individual and environmental situations such as the use of knives in the kitchen and including the safe storage of cleaning products. In addition people had individual risk assessments in relation to managing money, keeping safe while in the community and the safe administration of people's medicines.

People told us staff assisted them to take their medicines regularly and safely. Some of the people were supported to manage their own medicines which enabled them to remain as independent as possible. In these cases there were plans to check people had taken their medicines as prescribed. Staff had been trained in the safe administration of medicines and had three competency checks a year where their manager or a superior observed their practice.to help ensure they continued to work in a way that supported good practice. We saw that Medicine administration records (MAR) were accurately completed and signed by staff after they administered people`s medicines. Audits were completed both by the service and also by the dispensing chemist which ensured that any concerns or issues could be identified and addressed in a timely way.

Is the service effective?

Our findings

People who used the service were very complementary and positive about the staff who supported them. One person told us, "I am so glad to be living here, as for the staff they are marvellous. They support me with everything I need." We observed the staff to be effective in the way they supported people, demonstrating they knew their needs really well as well as their preferred routines. Another person told us "I don't know what training the staff have had but they do know most things, I never have any problems at all".

Staff completed an induction when their employment commenced and had on-going training in a range of topics relevant to their role and responsibilities. Staff also had an opportunity to 'shadow' more experienced staff until they were assessed as being 'competent' to work in an unsupervised capacity. One staff member told us, "The training is very good, not only do we cover all the basic topics but we can do specialist training relevant to people's conditions to help us understand how we can best support people." Another staff member said, "I really enjoyed my induction training. I am quite new so am still learning but it has really helped to give me the skills to care for the people who we support.

Staff were well supported by managers and one of the keys areas was 'effective communication'. We observed handover from shift to shift and saw that staff exchanged detailed information about the people they supported. One staff member told us "We have a small staff team here and are supported by agency staff so it is really crucial that information is handed over especially when agency staff may not know people quite as well as the permanent staff."

Staff told us they were supported through regular team meetings and one to one supervision with their line manager where they were given an opportunity to discuss all aspects of their work and any training or development needs as well as an annual appraisal. One staff member said, "Although I have regular meetings with my manager we can always come and have a chat if we are concerned about anything. The manager and deputy are a great team and are very approachable."

People confirmed that staff sought consent before assisting them and the service worked in accordance with the principles of the Mental Capacity Act. We saw from people's care and support plans that people had signed or indicated that they had consented to their care plans. Staff demonstrated a good understanding of the Mental Capacity Act, and told us that "Everybody has capacity unless they have a valid assessment which indicates otherwise.

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 received effective care following an assessment of their needs.

We observed on the day of our inspection two people were being supported with food shopping and had prepared a shopping list. Other people were more independent and needed less support in relation to both

their food shopping, preparation and cooking of meals. However staff were on hand to support as required. People were able to choose what and when they ate and drank and we observed people being assisted with various meals. One person was being assisted to make their own pizza and another person had a casserole cooking in the slow cooker. Three other people were having soup for their lunch. People ate at different times depending on what suited them. One person told us "the staff cooks us a lovely roast dinner on a Sunday which we really enjoy."

People's health needs were met and they were supported to make and attend health related appointments. One person told us "I can go to the Doctors s myself but I let the staff know as well. In addition to routine appointments people were encouraged to have an annual health check to help ensure they were proactive in maintaining people`s health and well-being. We saw that all health related appointments were recorded in a separate folder so that there was an on-going record of people's health records. One person told us they had dental check up's and had eye tests or chiropodists if they needed them. Having access to health care professionals helped to make sure peoples general physical and mental health were maintained.

Our findings

People told us they "Loved living at Lewes road". The feedback was consistently positive and complementary in relation to the staff and management at the service. Two people we spoke with told us how the management and staff had such caring attitudes and a personable approach. One person told us, "They [staff] are all lovely, I really like living here and I have lots of friends here." Another person told us, "The staff are brilliant. They are all so nice, especially my keyworker, they treat me like an individual person." We observed throughout our inspection that staff had positive engagement and interaction with the people they supported. We heard lots of chatter and laughter and saw that people were very comfortable in the presence of the staff.

We observed staff to be kind and caring and to have a good working relationship with the people they supported. They were knowledgeable about people`s needs and the way they liked to be supported as well as their individual routines. People told us staff respected their choices and were not judgemental about any aspects of their lives. People's individuality was both respected and celebrated. This meant that staff respected people`s individuality and promoted equality and diversity by delivering care and support which was personalised to peoples individual requirements.

People could choose to be supported by male or female support workers. People told us and we observed that staff respected their privacy and dignity. Throughout the inspection we saw staff knocking on doors and calling people by their preferred names. One person told us, "They would never just walk in they knock and wait to be invited in."

We found the management and staff at the service demonstrated a 'people first culture.' The registered manager told us, "We promote and support people's individuality and independence". We do the very best we can for the people, it's their home they choose, it's as simple as that we are all visitors it's not our place of work it's their homes. One person said the staff really do go over and beyond what is expected of them and nothing is ever too much trouble for them."

People were encouraged and supported to maintain and develop relationships that were important to them, both with other people at the service and with relatives and friends. People told us they were able to have visitors at any time as long a staff knew so that people were kept safe. One person told us "The staff even offer visitors a cup of tea and sometimes I make them one as well."

People and relatives where possible and appropriate had been involved in the development and review of people`s care and support plans. One person told us, "They [staff] discuss my care plan every so often and they ask if I am happy with my support." We saw that care plans were personalised and contained information about the individual. This meant that you could tell by looking at the plan a little about the person's life history and how the person liked to be supported and what they enjoyed, for example one person had a small family pet which they looked after and which was a really important part of their life.

People's private and confidential information and records were securely maintained in lockable offices. Staff

were aware of the need to protect people's private and personal information. This helped ensure that people's personal information was treated confidentially and respected. Only people who had a right to access records were permitted to do so and this was only with the consent of the person concerned.

Our findings

People told us they felt the service was 'responsive' to their needs. People were happy with the support they received and in how the service was flexible to meet any changes to their day to day needs. A staff member told us how the service was able to respond to changing needs of the people they supported for example, if a person required additional support this was organised through discussion with the commissioners for the servicer or if a person required additional support to attend an event of a function this was arranged. If a person wanted to be more independent their support plans would be reviewed in accordance with their revised requirements.

People`s care plans had detailed and person centred information about people's needs to enable staff to deliver care in a personalised way. Staff discussed several peoples care plans detailing specific aspects of their care relevant to the individual such as the time they like to get up and how they like to spend their day. One person who 'worked' was supported by staff to attend meetings, arrange travel and the staff all adapt to fit in around the persons requirements. In the case of another person who undertook 'paid' work for the organisation this involved regular travel, planning ahead and staff support the person to do this in the way they want to. For example what time they needed to get up and ready, and the times of the trains and connecting transport, arrangements for refreshments.

We found the care and support provided to people was extremely responsive to people`s changing needs. Changing care needs also took into account any changes to the level of risk and these were kept under regular review.

People were supported to participate in a range of activities and hobbies. People were involved in many community events and we saw people freely coming and going throughout the day.. We observed people taking part in various activities within the communal areas of the home including playing games, listening to music and attending some events arranged by staff such as quizzes and evenings out at local venues like clubs or restaurants. People confirmed it was their choice and if they did not want to be involved in events or activities there was no problem.

The management and staff were very proactive which ensured people had a 'can do' approach by being responsive to people's needs and enabled them to achieve things that they aspired to for example being able to participate in paid work, and educational achievements. They promoted people`s well-being by offering and supporting them with opportunities to live an active and meaningful life. For example by supporting people to shape the future of services by giving feedback and by being involved in the running and monitoring of the service.

People told us they felt the managers and staff listened to them and took their feedback on board, and acted on ideas. They also told us that their suggestions were listened to. One person told us they had been involved in choosing the decorations and soft furnishing for a communal lounge downstairs. Another person told us they had regular meeting to discuss anything 'residents' wanted to discuss. We saw from recent minutes that actions were completed and reviewed at the beginning of the next meeting and an explanation

offered with regard to any agreed action and any outstanding issues were discussed and an update provided.

There was a comprehensive complaints policy and procedure in place. However no formal complaints had been recorded since our last inspection. We saw the staff were able to action and resolve issues to people's satisfaction on an informal basis. One person told us, "I have never had to complain about anything, it's a great service". Another person told us "I would talk to staff or the managers if I had any problems at all."

Is the service well-led?

Our findings

People told us they felt the service was well managed and well led. Everyone we spoke with told us how they enjoyed living at Lewes road and one person told us they liked it so much they recommended it to a friend who now also lives at the service.

One person told us "I like everything about this place, my own flat and space and my friends, lovely staff and the managers are so nice too." Another person told us "They are all so approachable, I think the service is well run and well-managed, I am really happy with the care and support that is provided."

Staff told us they were happy working at the service and had clear roles and responsibilities. There were good staff support arrangements in place and we saw that the staff worked as a team. Staff told us the manager and deputy manager were "A great team, they had been there for years and had developed along with the service." Another staff member said "I like the transparency; the service is well managed and is operated in an open and inclusive way." They also told us "Everybody is kept in the loop and we all feel consulted about the things that matter which is the people we support."

The registered manager had worked at the service for many years and told us there had been many positive changes. They had clear objectives and goals for the service. They told us they implemented changes and improved the way the service operated so that the people they supported experienced the best possible care.

Feedback was obtained through various methods which included an annual survey, quality monitoring audits and audits undertaken by staff from other services so that an objective overview of the service was obtained. In addition to formal feedback people had the opportunity to share their views or discuss anything they wished at regular meetings organised at the service.

We found that the systems in place were effective in identifying areas for improvements. The registered manager, deputy manager and all the staff had a role to play which ensured the quality of the service was maintained and worked in partnership with other professionals. This meant that if they needed support or advice it was readily available and forged good working relationships with partner agencies'.

One staff member told us "If I could sum this place up I would say it is a fantastic place to work, there is no hierarchy but there is respect." It really is all about the people here, that's what makes it so different from other places I have worked". We are a team here and everyone belongs, that's the way it should be happy team, happy home."