

Newfield View Supported Living Limited

# Newfield View Supported Living

## 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

Newfield View Supported Living is registered to provide personal care to adults who need support to maintain independence. People supported are tenants of seven properties in the Gleadless area of Sheffield. Each property is a two or three bedroom house, in character with other properties in the area. The services main office is located alongside one of the properties. Two people supported live in their own homes in other areas of Sheffield.

At the time of this inspection Newfield View Supported Living was supporting 21 people within the provision of the regulated activity 'personal care'.

There was a manager at the service who was registered with CQC. 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 and associated Regulations about how the service is run. The registered manager was also the registered provider for this service.

This inspection took place on 10 October 2016 and short notice was given. We told the registered manager two days before our visit that we would be coming. We did this because the registered manager is sometimes out of the office and we needed to be sure that the registered manager would be available. We also wanted to make sure we would be able to meet with some people supported by the service and some staff.

People who used the service told us they were "Happy" or "Very Happy" with the support provided. They told us they liked their support workers and the registered manager.

There were systems in place to ensure risks to people's safety and wellbeing were identified and addressed. The registered provider and staff team were well aware of their responsibility to protect people's health and wellbeing.

A full and thorough recruitment process was followed which helped to ensure staff employed at the service were of good character and able to carry out their role to the required standard.

There were sufficient numbers of support workers available to keep people safe. Staffing levels were determined by the number of people who used the service and their individual needs.

Systems were in place to support people with their medicines safely.

People who used the service told us support workers were "Good" and gave them the support they needed. Comments included, "They [support workers] are great. They know all about me" and "They [support workers] are my friends."

We found staff were provided with relevant training, supervision and appraisal for development and support.

Staff told us they were very well supported by the registered manager who was always available to talk to if they needed advice or information. Staff told us communication was good and they worked well together. All of the staff spoken with showed a sense of pride at working at this service.

The service followed the requirements of the Mental Capacity Act 2005 (MCA) Code of practice and the principles of the Deprivation of Liberty Safeguards (DoLS). This helped to protect the rights of people who may not be able to make important decisions themselves.

People's care and support was provided in a person centred way. Information about how people preferred their support to be delivered was kept under review and up to date.

People who used the service felt able to express their opinions and views. People told us their views were listened to and where necessary action was taken to improve their experience of the service.

We found the service had a robust process in place to enable them to respond to people and their concerns, investigate them and had taken action to address their concerns.

There were effective systems in place to monitor and improve the quality of the service provided. Regular checks and audits were undertaken to make sure full and safe procedures were adhered to.

## 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.

Procedures for the safe administration of medicines were in operation to maintain people's health and safety.

Risk assessments had been undertaken to identify and minimise risks.

Full and safe staff recruitment procedures were in operation to ensure people's safety was promoted.

Staff had been provided with safeguarding adults training.

People told us they felt safe with their support workers.

### Is the service effective?

Good ●

The service was effective.

Staff were provided with relevant induction and training to make sure they had the right skills and knowledge for their role.

Staff were provided with supervision and appraisal for their development and support.

People received effective care that met their needs and wishes.

People said they knew all of their support workers.

### Is the service caring?

Good ●

The service was caring.

Staff respected people's privacy and dignity and knew people's preferences well.

People said staff were caring in their approach.

Staff knew to always maintain confidentiality

### Is the service responsive?

Good ●

The service was responsive.

People's support plans were detailed and person centred. Care plans had been reviewed to ensure they were up to date.

Staff had a good knowledge of the people they were supporting.

People had been provided with information on how to make a complaint. A system to record and respond to any complaints was in place.

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

The service was well led.

The leadership and management of the service created a positive culture where people felt included and supported.

The service provided was regularly checked and audited to make sure systems were safe and people were happy with the service they received.

People who used the service, their relatives and staff felt well supported by the registered manager and said they were listened to.

**Good** ●

# Newfield View Supported Living

## **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 checked whether the registered provider was 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.

We asked provider to complete a Provider Information Return (PIR). This is a document that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We received the completed PIR as requested.

Prior to our inspection we spoke with the local authority to obtain their views of the service. Information received was reviewed and used to assist with our inspection.

This inspection took place on 10 October 2016 and short notice was given. We told the registered manager two working days before our visit that we would be coming. We did this because the registered manager is sometimes out of the office supporting staff or visiting people who use the service. We needed to be sure the registered manager would be available. This inspection was undertaken by two adult social care inspectors.

As part of this inspection we visited three properties and spoke in person with four people supported by Newfield View Supported Living to obtain their views of the support provided. In addition, two people visited the services office so we could speak with them in person and one person spoke with us over the telephone. We spoke with a parent of one person to obtain their views of the support provided to their relative. We also spoke with a personal assistant (PA) of a person who was supported by this service.

We visited the office and spoke with the registered manager, an administrator, four support workers and a senior support worker about their roles and experiences of working at the service. In addition, we spoke with three support workers during our visits to people's homes.

We spent time looking at records, which included three people's support plans, four staff records and other records relating to the management of the service, such as training records and audits.

# Is the service safe?

## Our findings

People told us they felt safe with their support workers. Comments included, "Oh yes I feel very safe" and "[Laughing] I am safe here, I like it a lot." One person visited in their home told us they liked to write things down on paper. The person visited the services office later in the day and gave us a piece of paper they had signed with several statements on regarding their support. One of the statements was; "Reasons I like living here. I feel safe and I like to do my bit looking out for others. If I see something I would say something."

We found appropriate policies were in place for the safe administration of medicines so staff had access to important information. We found the support plans checked contained clear detail regarding medicines and who was responsible for administration. Where relevant, a medicines risk assessment had been completed to address and minimise any risk. The support plans seen also contained details of the person's medicines so staff were fully informed. Staff spoken with confirmed they had undertaken training on medicines administration. We looked at the staff training matrix which showed all support workers had been provided with medicines training to make sure they had appropriate skills and knowledge to keep people safe and maintain their health. We checked people's Medication Administration Records (MAR) during visits to their homes. We found the medicines held corresponded to the MAR and had been fully completed to show medicine had been administered. This showed safe procedures were followed.

Staff spoken with confirmed they had been provided with safeguarding vulnerable adults training so they had an understanding of their responsibilities to protect people from harm. Staff could describe the different types of abuse and were clear of the actions they should take if they suspected abuse or if an allegation was made so correct procedures were followed to uphold people's safety. Staff knew about whistle blowing procedures. Whistleblowing is one way in which a worker can report concerns, by telling their manager or someone they trust. This meant staff were aware of how to report any unsafe practice. Staff said they would always report any concerns to the registered manager and they felt confident they would listen to them, take them seriously, and take appropriate action to help keep people safe. Information from the local authority and notifications received showed procedures to keep people safe were followed.

We saw a policy on safeguarding vulnerable adults was available so staff had access to important information to help keep people safe and take appropriate action if concerns about a person's safety had been identified. Staff knew these policies were available to them.

We found there was a policy on handling people's finances, which had been reviewed and was up to date. We checked people's financial transaction records during visits to their home and found they recorded the items purchased and the balance. Receipts were retained to verify records were accurate. This showed safe procedures were followed to keep people safe from financial abuse.

We found the service had recruitment policies and procedures in place that the registered manager followed when employing new members of staff.

We checked the recruitment records of four support workers. They all contained an application form

detailing employment history, references, proof of identity and a health declaration. We saw a file was kept which held a Disclosure and Barring Service (DBS) check for all staff employed. All staff spoken with confirmed they had provided reference checks, attended an interview and had a DBS check completed prior to employment. A DBS check provides information about any criminal convictions a person may have. This helped to ensure people employed were of good character and had been assessed as suitable to work at the service. This information helps employers make safer recruitment decisions.

At the time of this inspection 22 support workers and eight senior support workers were employed. Each of the seven properties had a senior support worker and two or three support workers usually based there. Staff told us there was always at least one support worker at each property at all times. Office staff comprised of an office manager and two administrators. This showed appropriate levels of staff were provided in line with people's identified needs.

We looked at four people's support plans and saw each plan contained risk assessments that identified the risk and the support required to minimise the risk. We found risk assessments had been evaluated and reviewed to make sure they were current and remained relevant to the individual.

Staff spoken with told us they had received training in the control of infection and were provided with appropriate personal protective equipment [PPE] such as gloves and aprons to use when necessary.

## Is the service effective?

### Our findings

People spoken with told us their support workers were "Good" and commented, "I like them all. They help me" and "They know what support I need and they know what I like."

A relative spoken with said they felt communication from the service was good; the support workers were well trained and were competent in their work. They commented; [The registered manager] picks good staff. They are well trained. They are a brilliant bunch of staff. The carers keep in touch with me and will ring me to ask advice. I have no worries and am completely relaxed about the support they provide. I am absolutely fastidious about [name of supported person's] care. They [staff] were very good and we had a detailed handover when the service started supporting [my relative]. The staff are very much aware [of the person's specific style of communication] and know how they are. They are more than approachable. They are very efficient and helpful."

A community professional contacted prior to our inspection commented, "The service always responds proactively and quickly to any discussions we have. There is a good line of communication between ourselves and the agency. There are regular meetings with the manager of the service."

Staff spoken with said they undertook regular training to maintain and update their skills and knowledge. All of the staff spoken with said the training provided by the registered provider was good. We saw the staff training matrix which showed the training completed and due for all staff. Staff told us they were reminded when their refresher training was due. A range of training was provided, which included mandatory subjects such as moving and handling, safeguarding adults and food hygiene.

We saw records of a five day staff induction that was provided to staff which covered policies, procedures and codes of conduct. New staff spoken with said they shadowed more experienced staff as part of their induction. New staff were working towards achieving the 'Care Certificate'. The 'Care Certificate' is the new minimum standards that should be covered as part of induction training of new support workers.

Staff received support to understand their roles and responsibilities through supervision and an annual appraisal. Supervision is an accountable, two-way process, which supports, motivates and enables the development of good practice for individual staff members. Appraisal is a process involving the review of a staff member's performance and improvement over a period of time, usually annually. Supervision consisted of individual one to one sessions and all staff said they found them helpful and supportive. Records seen showed regular supervision was provided to staff in line with the frequency identified in the supervision policy.

Mental Capacity Act 2005 (MCA) is legislation designed to protect people who are unable to make decisions for themselves and to ensure that any decisions are made in people's best interests. Deprivation of Liberty Safeguards (DoLS) are part of this legislation and ensures where someone may be deprived of their liberty, the least restrictive option is taken. Where someone is living in their own home, applications must be made to the Court of Protection.

We saw staff were provided with training in MCA and DoLS and had an understanding of this legislation. There was a policy on consent to care and treatment to ensure clear procedures were in place to obtain people's agreement. We spoke with the registered manager and support staff about the systems in place to ensure people consented and agreed to the support provided. They explained assessments were always undertaken with the person supported and their relatives to ensure their views were obtained. People were also involved in writing their support plan and they (or their relative) signed them to evidence their agreement.

The care files seen at the office and in people's homes showed people had consented to their support and had signed their support plans. We saw people had contributed to compiling their care plans and their wishes had been listened to and acted upon.

People were happy with the support they received to assist them to eat a well-balanced diet and drink sufficient fluids. One person told us, "They [support staff] help us do a menu and then a list of what we need. We like the food."

The care records seen held evidence people had regular contact with a variety of health care professionals to support their health and wellbeing. Each person also had a 'Health Passport' which held important information about any medical conditions and medicines if the person needed to go into hospital. Staff spoken with were knowledgeable about people's health care needs.

## Is the service caring?

### Our findings

People supported spoke very positively about their support workers and told us they were always treated with dignity and respect. Comments included, "I like them all," "They are good, they help us to do what we want" and "They are great." One person visited in their home told us they liked to write things down on paper. The person visited the services office later in the day and gave us a piece of paper they had signed with several statements on regarding their support. One of the statements was; "Reasons I like living here. I have a nice home. I feel included. My decisions and choices are heard and respected."

A relative told us, "I have never been happier. My [relative] is supported by people that genuinely care."

The service sent out questionnaires to relatives in 2016 to obtain and act on their views. We saw the returned questionnaires which were very positive. Recent comments included, "[Name of person supported] self-confidence has increased and their anxiety lessened as a result of careful and timely support from staff" and "[Name of person supported] loves living here. They love all the staff and we are grateful for the care and love they receive."

A community professional contacted prior to our inspection commented, "All the staff appear friendly and supportive to those they support."

We found communication was good within the service. The relative spoken with told us support staff always kept them informed and they had built up a good relationship with the registered manager. We found systems had been put into operation to involve people and help them share their views. A monthly 'tenants meeting' was held for all people supported by the service. The registered manager and a senior support worker spoken with said these meetings had not been well attended. As a result the meetings format was changed to a 'tenants get together' where a social aspect such as 'nibbles' and karaoke formed part of the meeting. Since the 'get togethers' had been introduced they had been very well attended. We saw minutes of the most recent 'get togethers' with showed a variety of topics had been discussed. This showed people were involved and provided with relevant information.

We visited three properties and spoke with four people supported and their support workers who were present during our visit. We were able to observe how support workers related to people who were supported by the service. We saw people were receiving support from staff they knew well. We saw the support workers treated people with respect. We observed a caring attitude which showed people had a very good relationship with their support workers.

People told us support workers respected their privacy and they had never heard support workers talk about other people. This showed staff had an awareness of the need for confidentiality to uphold people's rights.

We found the service had relevant policies in relation to confidentiality, data protection and privacy and dignity so important information was available to staff. Staff spoken with could describe how they respected

people and maintained their dignity. Comments included, "We all really care. We want to help people be as independent as they can be. People [we support] are always put first."

The registered manager was enthusiastic about making a difference to people's lives. This enthusiasm was also shared with the support workers we spoke with.

We spoke with support workers about people's preferences and needs. Staff were able to tell us about the people they were supporting, and could clearly describe people's personalities, interests, support needs, communication and what was important to them. This showed staff had a detailed and in depth knowledge of the people they supported.

We looked at three people's care records. The care records showed people supported and their relatives had been involved in their initial care and support planning. We saw care plans contained signatures, evidencing people agreed to their planned care and support. Each care plan contained details of the person's care and support needs and how they would like to receive this. The plans gave details of people's preferences, likes and dislikes so these could be respected by support workers.

We saw information was provided in different formats to meet people's needs. Throughout the inspection we saw examples where a written document also had a corresponding pictorial document to help people's understanding.

## Is the service responsive?

### Our findings

People spoken with said they had been involved in planning their care so the support provided could meet their needs. They told us they were not worried about anything and could talk to staff if they had any concerns. Comments included, "I can talk to any of them [support workers]. They are good," "I don't have any problems but I would go to whoever was in the office" and "I would talk to [name of support worker] if I was worried, and I would talk to [my relative] but I am not worried about anything."

One person visited in their home told us they liked to write things down on paper. The person visited the services office later in the day and gave us a piece of paper they had signed with several statements on regarding their support. One of the statements was; "Reasons I like living here. I can approach staff and the manager if I have any problems. I like that all the staff know me. I wouldn't like agency care workers coming into my home." and "I have input in my care plan and reviews. Staff support me to make any changes."

A relative spoken with said they found the service and staff flexible and responsive. They felt staff knew their relative very well and provided individualised support. Their comments included, "The staff know [name of relative supported] inside out and [my relative] regards them as friends. We have no complaints at all, and have nothing but praise. We have built up a good relationship with [the registered manager] and carers. They always listen and have been very, very good. They are really flexible and did extra when I needed it."

A community professional contacted prior to our inspection commented, "All service users appear happy. They have active social lives and the care agency actively encourages and promotes independence for the service users on a daily basis."

We looked at three people's support plans. These were well organised, well set out and easy to read. The plans contained a range of relevant and detailed information that included information on daily routines, preferences and choices, health needs and an 'All about me' section which described people's history and what was important to them. The plans clearly reflected people had been involved in formulating and reviewing their care plan. We found there was a record of the relatives and representatives who had been involved in the planning of people's care. We saw evidence on people's support plans that they had been referred to health professionals when needed. We found people's support plans were regularly reviewed and in response to any change in needs.

We saw the service promoted people's wellbeing by taking account of their needs including activities within the service and in the community. We found people led busy and active lives that reflected their individual needs and wishes. People were supported to attend day services regularly and people told us they enjoyed this. People spoken with were able to describe a range of activities they had participated in. These included going to the pub, going bowling and going on holidays. One person told us they liked going to the shops, another person said they cycled every day. It was clear activities were organised to meet people's individual needs.

Support staff spoken with said people's support plans contained enough information for them to support

people in the way they needed. Staff spoken with had a very good knowledge of people's individual needs and could clearly describe the history and preferences of the people they supported. Staff told us plans were reviewed and they were confident people's plans contained accurate and up to date information that reflected the person.

We found the support plans we checked held evidence reviews had taken place to make sure they remained up to date and reflected any changes.

There was a clear complaints procedure in place. The complaints procedure gave details of who people could speak with if they had any concerns and what to do if they were unhappy with the response. The procedure gave details of who to complain to outside of the organisation, such as CQC and the local authority should people choose to do this. There was also a pictorial complaints process available and a copy of this was provided in each property. This showed people were provided with important information to promote their rights and choices. We saw there was a robust process in place to respond to concerns or complaints by people who used the service, their representative or by staff. At the time of this inspection there were no complaints about the service.

# Is the service well-led?

## Our findings

The manager was registered with CQC as manager and provider.

There was a clear staffing structure including an office manager, senior support workers and administrators. Staff spoken with were fully aware of the roles and responsibilities of different staff and the lines of accountability.

The registered provider/ registered manager actively sought and acted on the views of people. We asked people supported by the service if they thought there was anything that could be improved on at Newfield View Supported Living and were told, "We can't think of anything."

People supported and the relative spoken with knew the registered manager well. We observed some people who were supported by the service with the registered manager. They obviously knew each other well and displayed a caring and close relationship. People commented, "I like [name of registered manager]" and "She is great."

Staff spoke very highly of the registered manager and we saw the service had an open culture where staff and people supported felt able to speak up and contribute. All of the staff spoken with displayed pride at working for Newfield View Supported Living. Staff commented, "I really think we are a brilliant team. [The registered manager] is always available and is a fantastic support," "I have worked in care for many years and [the registered manager] is the best manager I have ever had," "There is a big support network for staff. Sometimes days are intense but we all support each other and talk things through. Communication is really good. There is a staff structure but it's not regimented" and "We all work well together. The staff team have been through some changes but we are strong. People care. It's family orientated and a happy friendly place."

The service had good systems in place for listening to people and acting on their views. People who used the service and their relatives were invited to regular reviews. In addition, 'tenants get togethers' were held to share information and obtain people's opinion about anything that was important to them.

Each year people who used the service, their relatives, staff and professional visitors were sent out quality assurance questionnaires asking their opinions of the service. When questionnaires were returned the results were analysed, put into a report and a copy provided in each of the properties. We saw the results of the quality surveys showed positive results.

The registered manager explained that the professional surveys had just been returned and she was in the process of compiling a report from these. We found the returned surveys held positive comments which included, "I have worked with the Newfield View team for 12 years. I have always been impressed by the consistently high standards of personalised care and support given" and "The service is always very perceptive about the needs of individuals and is receptive to any input from our service."

Tenant's surveys were undertaken in July 2016 in an easy read and pictorial format and staff surveys were completed in August 2016. The results from these surveys were positive. The registered manager told us that where any issues were identified, these would be addressed in an action plan.

We found regular staff meetings were held so people had the opportunity to share information. All of the staff spoken with said they could speak up at staff meetings and felt listened to.

We found a quality assurance policy was in place and saw audits were undertaken as part of the quality assurance process to question practice so gaps could be identified and improvements made. For example, we saw audits were undertaken on MAR and financial transaction records to make sure they were fully completed and accurate. We saw spot checks (observation visits) had been completed by senior support workers to ensure people were being provided with the support as identified as needed.

We found the registered provider/ registered manager employed an external consultant to support the quality assurance processes. The consultant had undertaken a full audit of the service in line with the five key areas set out in this report. Any improvements had been identified and acted upon, for example the provision of a 'This is what makes me' document in each care file and the provision of an easy read version of the complaints procedure. In addition, the external consultant provided the registered manager with supervision meetings for their support and development.

We found the registered provider/ registered manager had signed up with an external company to 'self-assess' their service to identify and act on any improvements. These examples showed an active approach to quality monitoring.

We reviewed some of the registered provider's policies and procedures and saw these were updated on a regular basis to ensure they reflected current legislation. The registered provider/ registered manager were aware of their responsibility to inform the CQC about notifiable incidents and circumstances in line with the Health and Social Care Act 2008. Staff told us policies and procedures were available for them to read and they were expected to read them as part of their training programme.