

Nugent Care

Nugent Community Choices (Sefton)

Inspection report

At Local Solutions
Mount Vernon Green, Hall Lane
Liverpool
Merseyside
L7 8TF

Tel: 01517069530

Website: www.nugentcare.org

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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

This comprehensive inspection took place on the 24, 25 and 26 October 2016. Nugent Community Choices (Sefton) provides a supported housing service to people with learning disabilities. The four supported houses have eleven people currently living in them and are situated in Merseyside and the surrounding areas. Most of the houses are staffed 24 hours a day. There is also an outreach service that provides support to 17 people. The service is managed by Nugent Care and the office is situated in Liverpool.

The manager was registered with the Care Quality Commission. 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.

We looked at the medication records for two people. The medication procedure for staff was to prompt people or to administer their medication. Records stated that support staff would record all medication on the provider's medication record sheets. In relation to the services covert medication practice we were told that there were no people receiving this support. We discussed this practice with the register manager.

We looked at records relating to the safety of the office premises and its equipment, which were correctly recorded. We were shown where confidential records were stored in lockable filing cabinets and password protected on the computers.

People received sufficient quantities of food and drink and had a choice in the meals that they received if this was part of their person centred care plans (PCCP). Their satisfaction with the dietary options provided had been checked. Where people's weight changed this was recognised, with appropriate action taken to meet the person's nutritional needs.

The provider had complied with the Mental Capacity Act 2005 and its associated codes of practice in the delivery of care. We found that the staff had followed the requirements and principles of the Mental Capacity Act 2005 (MCA). Staff we spoke with had an understanding of what their role was and what their obligations were in order to maintain people's rights.

We found that the person centred care plans and risk assessment monthly review records were all up to date in the two files looked at. There was updated information that reflected the changes of people's health.

People told us they felt safe with staff. The registered manager had a good understanding of safeguarding. The registered manager had responded appropriately to allegations of abuse and had ensured reporting to the relevant local authorities and the CQC as required.

Accidents and incidents were recorded and monitored to ensure that appropriate action was taken to

prevent further incidences. Staff knew what to do if any difficulties arose whilst supporting somebody, or if an accident happened.

The staffing levels were seen to be sufficient at all times to support people and meet their needs and everyone we spoke with considered there was adequate staff on duty.

The service used safe systems for recruiting new staff. These included using Disclosure and Barring Service (DBS) checks and annual self-disclosure checks made with the manager. The staff files did include a photograph of the staff. They had an induction programme in place that included training staff to ensure they were competent in the role they were doing at Nugent Community Choices (Sefton). Staff told us they did feel supported by the registered manager and team leaders.

The two person centred care plans we looked at gave details of people's medical history and medication and information about the person's life and their preferences. People were all registered with a local GP and records showed that people were supported to see a GP, dentist, optician, and chiropodist as needed.

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.

Medication records were in place and medicines were documented appropriately.

Staff had been recruited safely. Recruitment, disciplinary and other employment policies were in place.

Safeguarding policies and procedures were in place. Staff had received training about safeguarding vulnerable people.

Is the service effective?

Good ●

The service was effective.

All staff had received training and had been provided with an on-going training plan. Staff received good support, with supervision and annual appraisals taking place.

People we spoke with said they enjoyed their meals provided by the support staff and that they had plenty to eat. People's weights were monitored if required and dieticians and health specialists were contacted.

Is the service caring?

Good ●

The service was caring.

People told us that their dignity and privacy were respected when staff supported them.

People we spoke with praised the staff. They said staff were respectful, very caring and helpful.

Is the service responsive?

Good ●

The service was responsive.

People who used the service were involved in their person centred care plan and, where appropriate, their support needs

were assessed with them and their relatives or representatives.

Suitable processes were in place to deal with complaints.

Care plan review documentation was always updated and seen to be relevant.

Is the service well-led?

Good ●

The service was well-led.

There were systems in place to assess the quality of the service provided at Nugent Community Choices (Sefton). People who lived at the supported living homes and who used the outreach service, their relatives and staff were asked about the quality of the service provided.

Staff were supported by the registered manager and team leaders.

The provider worked in partnership with other professionals to make sure people received appropriate support to meet their needs.

Nugent Community Choices (Sefton)

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 the 24, 25 and 26 October 2016. We gave 48 hours' notice to make sure that the registered manager or a senior person was on duty to enable the access to the records required for this comprehensive inspection. The inspection was carried out by an adult social care inspector. Before the inspection, the provider completed a 'Provider Information Return' (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We visited the service on the 24, 25 and 26 October 2016 and looked at records, which included the two people's person centred care records, four staff files and other records relating to the management of the service. We spoke with the registered manager, the training manager, a team leader and three support staff. We also spoke with a person receiving support. The visit also included a home visit to Newton Road where three people were supported to live as independently as practicable with the full support of staff.

Before our inspection, we looked at information the Care Quality Commission (CQC) had received about the service including notifications received from the registered manager. We checked that we had received these in a timely manner. We also looked at the safeguarding information, complaints and any other information received from members of the public.

Is the service safe?

Our findings

People we spoke to said they felt safe when supported by the staff. When asked if they felt safe, one person told us "The staff are good and make sure I am safe at all times".

Nugent Community Choices (Sefton) provided a supported living service to 11 people living in their own homes and 17 people having outreach support. The support ranged from 24 hour support to weekly escort support. The registered manager told us that they liaised closely with the local authority contracts departments to ensure the service could provide the relevant staff. There were 40 staff currently working at the service. We were told that the service was recruiting so that they had the staff to meet their contracts.

We spent time with the registered manager looking at the medication policy and procedure at the service. We saw that medication records were in the person centred care plans of the two people we case tracked. The medication records and medicine charts for both people were correct. We discussed if any person was being administered medication covertly the registered manager told us that there were none and if it was required they would request a 'Best Interest' meeting if the person did not have the capacity to agree to this procedure.

Staff had received training in medication administration. Staff we spent time with told us any issues with medication were always reported to the manager and team leaders who dealt with the issue immediately and liaised with the relevant health professional.

We spent time at the office of Nugent Community Choices (Sefton) and at one of the supported living schemes Newton Road, where three people lived in shared accommodation and were supported by Nugent Community Choices (Sefton) support staff. We spent time with one person being supported. We saw how the people had individualised their own rooms and all were furnished to a good standard. There was a communal lounge and a conservatory where people spent time with each other if they chose to and support staff were always present.

Health and safety of the office and people's homes had been checked through various risk assessments and audits. The office had contracts in place for the maintenance and servicing of gas and electrical installations and fire equipment. People had been supported by staff to have similar contracts in place of their home. This meant people were being supported to live in a safe environment. Information was available for staff in case of an emergency and gave details of who to contact.

Records showed that all staff had completed training about safeguarding adults. The registered manager and team leaders ensured that staff had refresher training every few years. We were given the training plans and safeguarding training was in place to update staff knowledge. The provider had a policy on safeguarding and this was dated May 2016. Staff we spoke to were aware of the need to report any concerns to a senior person and they had knowledge of their own responsibility to report any concerns about their workplace to an outside body if necessary.

We saw that risk assessments had been completed which had identified risks to people's safety and well-being. The risk assessments had been dated and marked as reviewed in both of the person centred care plans looked at. The review was indicated by a note of the date with information recorded if any changes had occurred and what actions were required to be implemented or with no changes documented meaning the reviews had produced no new information. The original risk assessments had been completed with regard to moving and handling, the environment, medication, equipment, socialising in the community and people's physical and mental health.

We saw that the registered manager had accident records that were completed in full showing what the incident was and how they had investigated, made referrals to other professionals and reported where required.

The registered manager was aware of the checks that should be carried out when new staff were recruited. We looked at four staff recruitment files including one latest staff file which we saw had the correct evidence that staff employed were suitable to work with vulnerable people. Qualifications, references and appropriate checks such as Disclosure and Barring Scheme (DBS) records had been checked. The provider had a disciplinary procedure and other policies relating to staff employment.

Is the service effective?

Our findings

We asked people about the skills of the staff and if they were competent in their roles. Comments received included "Really good staff", and "The staff are lovely all brilliant".

People were supported to have sufficient food and drink provided by support staff if it was part of their person centred care plans (PCCP). We talked with the support staff and people about food and diets and were told by a person "I choose what to have, good food". Staff told us that they support people to prepare their food and would cook if part of their PCCP. We were told that if people needed any special diets, or if there were dieticians involved, staff ensured they kept to what the required diet should be.

The support staff checked people's weight if required in the PCCP and made recommendations about their diet to professional nutritionist and dieticians. One person whose plan we looked at had gained weight and was being closely monitored. Staff were recording what the person ate on the daily records that were completed thoroughly.

We looked at staff training. Staff were up to date in training for providing support for people. We spent time with the training manager who was very enthusiastic about training staff. We looked at the training material and saw that the training was provided internally. We were provided with the training programme and sent the training matrix that showed that training was provided throughout the year on a rolling basis so that all staff were able to attend. Training for staff included health and safety, fire safety, first aid, challenging behaviour, dementia care, personal care and person centred care, Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS), food hygiene and infection control.

We spoke with staff who told us the training provided was good and had improved recently as there was now a new training manager. Staff were confident and happy about the training they had completed. The staff working at Nugent Community Choices (Sefton) also had a thorough induction that was provided in line with the 'Care Certificate' that is a set of standards for social care and health workers in their daily working life. It is the new minimum standards that should be covered as part of induction training of new care and support workers.

All staff had been provided with supervision meetings. The registered manager told us that the team leaders were trained to provide supervision to their teams. We looked at four staff files and saw that the four staff had supervision records in place. Staff told us they did have supervision with the managers or a team leader and said there was an open door policy and the manager was supportive and dealt with their issues immediately. Staff told us that they had an annual appraisal. We spent time talking to the registered manager and they confirmed that appraisals had taken place.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as

possible. People can only be deprived of their liberty so that they can receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act 2005.

We spent time with the registered manager who was knowledgeable about the MCA 2005 and the service had a procedure with records in place to show what actions had been taken in relation to people's mental capacity.

The staff we spent time talking with were aware of the MCA and some of the impacts it had on their role. All support staff spoken with had received training on the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Staff told us that they always sought people's consent; gave people choice; encouraged their independence and by consulting with and involving, relatives.

We observed staff interacting with people on the day we went to Newton Road. From their interactions it was clear staff had a good knowledge of each person and how to meet their support needs. Staff were very supportive and were heard throughout the morning confirming comments made by people, supporting people to make decisions and being patient. The people who lived at Newton Road that we spent time with told us that staff met their individual support and care needs and met their preferences at all times.

People were supported to attend healthcare appointments in the local community by staff. Staff monitored people's health and wellbeing. Staff were also vigilant in noticing changes in people's behaviour and acting on that change and records looked at informed that staff dealt with the changes effectively. The records we looked at informed the staff how to ensure that people had the relevant services supporting them.

Is the service caring?

Our findings

People told us that staff were always respectful and caring when supporting them. One person who used the service said "They're all brilliant" and "Excellent staff, very kind help me a lot". We observed when visiting Newton Road that people who used the service were supported when necessary, to make choices and decisions about what they wanted to do. Staff were not telling people what to do but encouraged them in what their plan was for that day.

We saw when members of staff were talking with people who required support; they were respectful to the individuals and supported them appropriately in a respectful manner. We observed staff reacting to people calmly and were always reassuring and pleasant.

We saw that staff respected people's privacy and were aware of issues of confidentiality. When visiting Newton Road staff knocked and waited until they were invited into the person's room.

We observed people being listened to and talked with in a respectful way by the registered manager. Staff were all seen and heard to support the people, communicating in a calm manner and also reassuring people if they became anxious. The relationship between the people being supported was respectful, friendly and courteous.

The registered manager and staff told us that if any of the people could not express their wishes and did not have any family/friends to support them to make decisions about their care they would contact an advocate on their behalf. The provider had an effective system in place to request the support of an advocate to represent people's views and wishes if required. We were told by the registered manager that no one had recently utilised this service. The information for advocates was made available and had the contact details of who staff should liaise with. The registered manager said that initially she would contact the Independent Mental Capacity Advocate (IMCA) at the local authorities she had contracts with.

Is the service responsive?

Our findings

The people who we spoke with were more than satisfied with the way staff support and care was provided. People told us they felt listened to and they would certainly be able to express concerns about the service if they had any and would speak to the team leaders or the registered manager. The people spoken with were sure they would know how to complain if it became necessary and all had not, so far, made any complaints. One person told us "I don't need to complain, I'm ok. I would speak to the team leader if I did".

We saw that information was kept in three different locations. These were the person's home, in a lockable cabinet in the main office and on a password protected database. We saw that the information was always reviewed and information updated to reflect changes that had taken place. In both people's files we looked at the person centred care plans (PCCP) were up to date, relevant and records reflected any change in service provision. For example, one person required more support from staff as they were unwell. The PCCP had been updated and the required support had been provided with staff liaising quickly with the commissioners to ensure the support met the person's needs.

Nugent Community Choices (Sefton) had a clear written complaints policy and this was included in the information pack given to people when they started using the service. The complaints procedure advised people to contact the registered manager if they wished to raise any concerns and gave contact details for the CQC. We asked people if they had the complaints procedure and had they used it. People told us that they had the complaints procedure and would use it if required. None of the people contacted had complained. We saw from the records that there had been no complaints in the last year. Records for old complaints were in place to show what actions had been taken and informed when the complainant was liaised with to ensure they agreed with the actions.

All the people we spoke with told us that they were fully involved in their PCCP. They reported that they had full choice in their PCCP and the way it was provided and they all considered they were in control of the care and support they received. People told us that staff always consulted them about how their support was to be provided.

The registered manager informed us that a service was not provided until they had been to meet and assess the person in their home surroundings. Whenever possible a family member was also present. We saw records of these assessments in people's files. The assessment forms had been completed in detail and recorded the agreement for the service to be provided. The forms were signed by the person requiring the support service or their family if they were not able to sign.

The PCCP and care plans included examples of specialist advice that had been sought. For example, a person had also been provided with health care professional support when arriving back to the service after a short stay in hospital. Staff told us that they informed the manager of any changes to the person's health. Records showed this communication took place regularly to ensure the comfort of the person.

Staff completed a visit log after each visit and we saw that entries were detailed and described the support

and care that had been provided and how the person was feeling.

We asked how staff liaised with any community services on behalf of the people receiving care. All staff told us they would call a doctor/ emergency services if they had concerns. They would always notify the manager of any actions taken and record in the daily record actions taken and the outcome. We were able to see how the service was able to contact relevant people to provide appropriate treatment and we saw how the service worked appropriately with other agencies.

Is the service well-led?

Our findings

The people who used the service told us that the registered manager was always available. People's comments included "The manager is really good, she's friendly". Staff comments included, "We have a good manager in place; very supportive and issues dealt with immediately" and "The manager is very good at communicating".

All staff spoken with were extremely positive about the service. We were shown records of information gathering where people using the service and staff were invited to complete a satisfaction questionnaire on the service. We were shown some of the information collated. The registered manager was liaised with by the provider and the information was shared and discussed at a meeting. We were told that the collated summary of the quality of the service questionnaires would be sent to the CQC.

There was a two tier management structure at Nugent Community Choices (Sefton) which comprised the registered manager and team leaders. The leadership was visible and it was obvious that the registered manager knew the people supported when they visited Newton Road and when we discussed people. Staff told us that they had a good relationship with the registered manager who was supportive and listened to them. We observed staff interactions with the manager which was respectful and positive. There was a manager or a senior member of staff always on duty to make sure there were clear lines of accountability and responsibility for the support staff.

The manager and the staff had a good understanding of the culture and ethos of the service, the key challenges and their achievements, concerns and risks. Comments from staff were "It's a good place to work, I really enjoy working here", and "We do provide good support to people here, we all work hard, it's a great service". Another comment was "Great place to work, love my job. I get a lot out of supporting people to be confident, independent and happy". Another comment was "The organisation is really good and I hope to stay a long time".

We noted that the provider worked in partnership with other professionals to make sure people received appropriate support to meet their needs.

There were effective systems in place to assess the quality of the service provided at the service. These included person centred care plan audits, staff file audits, medication audits, staff training audits, health and safety audits and incident and accident audits. We looked at the audits for January 2015 to September 2016. The audits showed how the registered manager had implemented action plans and documents were in place to inform what they had done to evaluate and improve the service. The registered manager informed us that they would act on issues immediately.

We looked at the ways people were able to express their views about the support that they received. One person told us "I am always asked if I am happy and I say yes".

Services which provide health and social care to people are required to inform the CQC of important events

that happen in the service. The registered manager of the service had informed the CQC of significant events in a timely way. This meant we could check that appropriate action had been taken.