

Creating Lifestyles Surbiton Limited

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Inspection report

75-77 Effingham Road
Long Ditton
Surrey
KT6 5LA

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29 November 2016

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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 inspection took place on 29 November 2016 and was announced.

Creating Lifestyles Surbiton Limited provides personal care to people with learning disabilities who live in their own homes in order for them to maintain their independence. The service consists of two shared houses where people hold their own tenancies, but have staff on site for support at all times.

At the time of our inspection the provider confirmed they were providing personal care, as regulated by us, the Care Quality Commission (CQC), to 8 people. The service also supported several other people who did not receive any personal care. Information relating to other people could not be included in this report.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Staff had a good understanding of abuse and the safeguarding procedures that should be followed to report abuse. Staff were confident that they were able to keep people safe and report abuse if they saw it.

People had risk assessments in place to positively support them to be as independent as possible. People understood the risk assessments that were in place for them, and staff found them easy to follow and useful.

Staffing levels were adequate to meet people's current needs. We saw that the service had a consistent staffing level and people received the support they needed.

The staff recruitment procedures ensured that appropriate pre-employment checks were carried out to ensure only suitable staff worked at the service.

Staff induction training and on-going training was provided to ensure they had the skills, knowledge and support they needed to perform their roles.

People told us that their medicines were administered safely and on time. We saw that medication administration was accurately recorded and medication was safely stored.

Staff were well supported by the registered manager and senior team, and had regular one to one supervisions. Staff were confident in their roles and told us they could access help whenever they needed it.

People's consent was gained before any care was provided and the requirements of the Mental Capacity Act 2005 were met.

People were able to choose the food and drink they wanted and staff supported people with this. People told us they were able to eat whenever they chose to and were encouraged to maintain a healthy diet.

People were supported to access health appointments when necessary. People we spoke with were either able to arrange and attend appointments themselves, or have staff support them to do so if they required.

Staff treated people with kindness, dignity and respect and spent time getting to know them and their specific needs and wishes. People told us they were happy with the staff team that supported them and were able to develop good relationships.

People were involved in their own care planning and were able to contribute to the way in which they were supported. People were consulted about their care and offered choices on a daily basis.

The service had a complaints procedure in place to ensure that people and their families were able to provide feedback about their care and to help the service make improvements where required. The people we spoke with knew how to use it.

Quality monitoring systems and processes were used effectively to drive future improvement and identify where action was 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.

Staff were knowledgeable about protecting people from harm and abuse.

There were enough trained staff to support people with their needs.

Staff had been safely recruited within the service.

Systems were in place for the safe management of medicines.

Is the service effective?

Good ●

The service was effective.

Staff had suitable training to keep their skills up to date and were supported with supervisions.

People could make choices about their food and drink and were provided with support if required.

People had access to health care professionals to ensure they received effective care or treatment.

Is the service caring?

Good ●

The service was caring.

People were supported make decisions about their daily care.

Staff treated people with kindness and compassion.

People were treated with dignity and respect, and had the privacy they required.

Is the service responsive?

Good ●

The service was responsive.

Care and support plans were personalised and reflected people's

individual requirements.

People and their relatives were involved in decisions regarding their care and support needs.

There was a complaints system in place and people were aware of this

Is the service well-led?

Good ●

The service was well led.

People knew the registered manager and were able to see her when required.

People were asked for, and gave, feedback which was acted on.

Quality monitoring systems were in place and were effective

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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 29 November 2016 and was announced. The registered manager was given 48 hours' notice of the inspection. We did this because we needed to be sure that the registered manager or someone senior would be available on the day of the inspection to help respond to our questions and to provide us with evidence.

The inspection was carried out by one 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 also reviewed the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law.

We spoke with four people who used the service, four support workers, the unit manager, the compliance manager, and the registered manager. We reviewed five people's care records to ensure they were reflective of their needs, five staff files, and other documents relating to the management of the service, including quality audits.

Is the service safe?

Our findings

People told us they felt safe in their environment and that the support they received was delivered safely. One person said, "Absolutely safe, no question about it." Everyone we spoke with told us that they had no concerns about safety within the service.

Staff were aware of the signs of abuse and how to report it. One staff member said, "If someone told me they were being abused, I would make sure to tell them that was listening, and that I would have to report it to make sure they were safe. Anything of concern gets reported to the manager or the Care Quality Commission (CQC) if required." All the staff we spoke with during our inspection had a good understanding of the safeguarding and whistleblowing procedure and we saw that they had received training in these areas. There was a safeguarding policy in place to guide staff, and the service had notified CQC of any incidents as required.

People had risk assessments in place to manage any risks present within their lives. The registered manager told us, "We make sure our risk assessments are all positive in their approach, to make sure that people can do as much as possible within reason." The risk assessments we saw identified the level of risk, the potential harm, and precautions in place, and covered areas such as community access, behaviour, mobility and health. All the information we looked at was regularly reviewed and kept up to date by the management.

We saw that the environment was kept safe and maintained appropriately. Environmental risk assessments were in place which included fire safety and gas and electrical maintenance records.

Safe recruitment practices were followed by the service. All the staff we spoke with told us that they completed Disclosure and Barring Service checks (DBS) and sought two references before starting work within the service. One staff member said, "I was not able to start before the security checks were complete." These checks made sure that staff were suitable and safe to work with people who lived at the service. The records we looked at showed that all necessary checks had been verified by the provider before each staff member began to work with people.

The people we spoke with felt that there were enough staff around to support them. One person said, "It's quiet a small service, there is always someone to support if needed." A staff member we spoke with said, "We do use agency staff to cover shifts, but we use the same people so that they are familiar with the service and the people using it." We saw that the service gained profile sheets of any agency staff they used to make sure they were appropriately trained to work at the service. During our inspection we saw that there were plenty of staff on shift and everybody who needed support was able to receive it. We saw staffing rotas which confirmed that a consistent staffing level was maintained.

People were safely supported with the administration of medication. One person told us, "The staff sort out my medication for me, it's easiest for me doing it this way." We saw that medication was stored within a locked trolley inside a locked cupboard. Medication Administration Records (MAR) were present and accurate. The individual medicines we checked were all in date, stored correctly, and an accurate amount of

stock was present. Appropriate disposal procedures were in place. We saw that medicine audits had taken place regularly by management.

Is the service effective?

Our findings

People told us that they felt the staff supported them well and understood their needs. One person said, "The staff are good, they understand how I am feeling, and that I like to keep myself to myself." Another person said, "They help me with everything that I need." A staff member said, "The training is regular and keeps us up to date, but the important thing is getting to know the people here. We have the time to chat to people and find out about what they want." All the staff we spoke with felt that they had been given a good amount of time to get to know people, and felt that they could rely on other staff for support. During our inspection we saw staff interact with people and support them to achieve their daily tasks. We observed that staff responded to one person in a specific manner that was documented within their care plan. This planned approach was to support the person and avoid certain triggers to documented behaviours. Staff were all consistent and supportive in all their communication with people using the service.

All staff received an induction before starting work at the service. One staff member said, "My induction was thorough and it enabled me to be confident in working with the people here." All the staff we spoke with told us that they spent time completing mandatory training courses, reading care plans, risk assessments and company policies, and then several shifts shadowing the more experienced staff members to see how they worked with people. The registered manager told us that most staff were supported to complete an nationally recognised qualifications as well as other regular training updates. We saw that records and certificates were kept that showed all the staff training, which included courses that were centred on the needs of the people using the service. For example, many of the staff had been trained in anxiety management to assist with the support of one particular person who used the service.. All the training was monitored and kept up to date by management.

Supervisions were held with staff to support them within their roles. One staff member said, "I have supervisions and I consider them to be worthwhile. I can speak about any issues I have, and the manager can discuss my work." We saw that records of supervisions were kept and showed that subjects such as colleagues, clients, work rate, performance and training were discussed. During our inspection we saw that both the registered manager and the unit manager were available for staff to speak with as they required.

Staff gained consent from people before any care was carried out. One person said, "I am quite independent, and the staff respect that. They always ask me before doing anything. I can see that they do the same with everyone else here as well." We saw that people had consent forms that they had signed for things such as photograph use, medication and consent to care. During our inspection we saw that staff communicated clearly with people and asked them for permission before carrying out any care.

We checked whether the service was working within the principles of the Mental Capacity Act (MCA). 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 MCA. In domiciliary care settings this is under the Court of Protection.

People were supported to maintain a healthy and balanced diet and could make choices about what they wanted to eat. One person said, "I have the choice to eat whatever and whenever I like, I eat my main meal whilst I am at work, but staff can assist me to make something if I don't eat at work." Another person said, "Yes the staff help me make sandwiches and anything I like." One staff member told us, "We support one person with their vegetarian diet, so we make sure things are cooked separately and that they know the content of any shared food." We saw that people had information within their care plans that informed staff of the types of foods they liked and disliked.

People had the support they needed to access health services. One person said, "The staff help me to the doctors when I need to go, we get a taxi." All the people we spoke with told us that they were able to see medical professionals when they needed too, and had the support in place to attend. A staff member told us, "We support a person with regular input from psychiatry and medication reviews." We saw that people had documented input with health appointments within their files.

Is the service caring?

Our findings

Staff had a caring approach towards the people using the service. One person said, "The staff are lovely, it's very good here, I wouldn't like to be anywhere else." Another person said, "Yes the staff are caring and respectful of me." One staff member told us, "I think that all the staff here care for the people. We all take the time to interact with people and see how they are. We remind any agency staff that are new to make sure they also take the time and chat with people as much as possible. It makes people feel comfortable and cared for. This is their home after all." During our inspection we saw that staff took time to speak with people and did so in a warm and friendly manner. We saw that one person said they were going shopping, and would be heading out to the local bus stop. A staff member supported the person to research online what time the bus was due, to make sure they did not have to stand in the cold bus stop for any more time than was necessary.

People were able to be involved in their own care planning. One person said, "Yes I do feel like I am involved in everything and have control over my own life. The staff know what I want and that I would like to be more independent." The staff that we spoke with told us that they had a keyworker system which meant staff would be assigned to an individual, and regularly review their care and routines, making sure that any changes were documented as required. We saw that people had records of more formal reviews with the support of social workers, in which their care was reviewed and their input was recorded.

Privacy and dignity was respected by all staff. One person told us, "The staff definitely know and respect that I like my private space. I choose when I want to spend time with others. Staff always knock on doors before entering." All the staff we spoke with understood the importance of respecting privacy and dignity. One staff member said "I treat people how I would want to be treated." Another staff member said, "We have to be mindful of people's right to confidentiality. We talk with people's family members regularly, and we have to make sure we respect what information people do and do not want family to know."

People were supported to be as independent as they could be. One staff member said, "We work together towards the main goals for the person. We try to empower people and promote independence with everything we do. I am conscious of how we as staff act whilst on shift, I want people to feel like this is their own home, and we are guests here supporting them." We saw that people's care plans reflected all the things they were able to do themselves, as well as things that people wanted to work towards achieving, and how staff should support them to do it.

People were able to have visitors and were supported to maintain the relationships that were important to them. One person said, "My sister is coming in a little while, she often comes and takes me out, she knows the staff well." All the staff we spoke with had an excellent understanding of each person's relationships with family and friends and this was documented within people's files.

Is the service responsive?

Our findings

People received an assessment of their needs before moving in to the service. The registered manager told us, "We usually receive a referral from the local authority. I would then meet with the person and family members if appropriate, and carry out a pre- assessment to identify their needs and see if we are right for them. The process after that is flexible to the person, so they can visit us a number of times before deciding if they would like to live here." We saw evidence that people had received pre-assessments as described by the registered manager.

People received personalised care that met their needs. We saw that care plans were person centred and included information about people's social needs, hobbies, interests and spirituality. We saw that areas of care planning were split into an area of need, the aims of the person, the steps required to achieve the aims, the people responsible to support, and the date for the target to be completed or reviewed. This format covered many areas of a person's life including personal care, physical activity, mental health, managing behaviours, managing finances, decision making and relationships. We saw that these plans were regularly reviewed and updated by staff.

All the staff we spoke with had an excellent knowledge of people's likes dislikes and preferences. The staff we spoke with told us that they respected everyone's choices and tried to engage people in their interests whenever possible. We saw that people had care plans which documented their likes. Care plans we saw had a 'Things I like' section which explained to staff all the things that they enjoyed doing and made them happy. This enabled staff to get to know people and provide positive care.

People's needs were regularly reviewed and updated as required. One person said, "I am happy with my care plans. I have a keyworker and I have the chance to go through things with them." The registered manager told us that people had quarterly reviews with their keyworkers where everything within their day to day care was looked at, and also a yearly social work led review. All the staff we spoke with said that they knew they could regularly update people's information if they noticed any changes. We saw that all reviews of care were documented and kept within people's files.

People were able to express any thoughts or concerns within tenants meetings. We saw minutes of these meetings that showed a variety of subjects were discussed and prompted, to encourage people to have input into their surroundings and service. For example, maintenance of the building, activities, and general updates were discussed and recorded within the tenants meetings file.

The service had a complaints procedure in place and people knew how to use it. People we spoke with were aware of the formal complaints procedure in the home. A person said "Yes I have made a complaint before to the manager. I think it was dealt with well and I was happy with the outcome." We saw that the service complaints procedure enabled the recording of the nature of the complaint, how it was dealt with, and the actions and evaluation of the management.

Is the service well-led?

Our findings

People told us they knew who the registered manager and unit manager were and were able to approach them and contact them without any problems. We saw that the people using the service all knew who the managers were and were very comfortable in communicating and interacting with them. We saw that the registered manager and unit manager were both involved in people's care and were able to cover and support the staff team as required. They had an excellent knowledge of all of the people in the service and the strengths of the staff team. The registered manager knew the specifics of each person's care and was able to advise us on the best way to communicate with certain individuals that used the service.

All the staff we spoke with told us that they were happy working at the service and felt well supported within their roles. One staff member said, "The manager is a very balanced and fair person." All the staff we spoke with made similar positive comments. During our inspection we saw that managers and team leaders were all supportive of each other and staff on shift.

The service was organised well and staff were able to respond to people's needs in a proactive and planned way. The staff we spoke with were aware of the visions and values of the service and felt positive about continuing to improve. We saw the service had a staff structure which included the registered manager, the unit manager, team leaders and support workers. We observed staff working well as a team, providing care in an organised and calm manner. None of the staff we spoke with had any issues with the running of the service or the support they received.

Staff recorded any accidents and incidents accurately and appropriate responses took place. We saw that the details of any accidents were recorded along with the people involved and the actions taken. We saw that the management had been made aware of all incidents, and risk assessments were updated when needed.

Staff were given the time they needed to support people fully and communicate with one another. All the staff we spoke with said that they felt able to spend the right amount of time caring for people and did not feel rushed. The shift patterns enabled staff to get things done and handover any information to other staff members coming on to shift. We observed that staff were given clear instructions from management and were able to carry out their roles successfully.

Staff members were able to raise concerns and have their voices heard. One staff member said, "I think everyone works together well and we are all honest with one another. We can speak openly with the manager and any concerns we may have are usually dealt with fairly." The staff were knowledgeable of the safeguarding and whistleblowing procedures and were confident in using them if required.

The service regularly monitored quality to enable improvements. We spoke with the compliance manager, whose job was to inspect the service and provide feedback. The compliance manager told us, "I carry out a full inspection of our service and then provide feedback on areas that require improvement. I work with the registered manager to make sure that any issues are addressed." We saw that all aspects of the service were

looked at in this process to make sure the standards remained high for the people using the service, and to make sure the service was compliant with the Care Quality Commission.

Questionnaires had been formulated which asked for opinions on the quality of the service. These were sent to people using the service and the staff to gather information and drive improvement. We saw that this information was reviewed by management and used to make improvements when required.