

Cygnnet (OE) Limited

Supported Living

Staffordshire

Inspection report

Unit D
Hunters Row shopping Centre
Stafford
ST16 2AD

Tel: 01785337999
Website: www.cygnethealth.co.uk

Date of inspection visit:
09 November 2022

Date of publication:
29 November 2022

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Supported Living Staffordshire is a service offering personal care to 22 people within the own homes. The service supports adults with learning disabilities and autism. People receive varying levels of support including 24 hours a day. People live in a variety of supporting living service across the west midlands area.

People's experience of using this service and what we found

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People were supported by enough suitable recruited staff who had received appropriate training. The policies within the home supported good practices, including infection control and safeguarding procedures.

Right care

Care plans and risk assessments were in place and when these incidents had occurred had been reviewed with people to reflect their current needs. There were systems in place to govern the home to ensure people were receiving the support needed. The audits completed were robust and effective in identifying areas of improvements.

The principles of STOMP (stop over medicating people with learning difficulties) had been considered and referenced when people were prescribed 'as required' medicines.

Staff enabled people to access specialist health and social care support in the community. People were happy with the caring support they received from staff.

Right culture

People were supported by a management and staff team which understood the holistic needs of supporting someone with autism or a learning disability. They worked closely with the person and relatives where appropriate to deliver appropriate care to people. They ensured the individual was at the forefront of this care, to deliver positive outcomes for people.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was good (published 11 December 2020)

Why we inspected

The inspection was prompted in part due to safeguarding concerns received. A decision was made for us to inspect and examine those risks.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Supported Living Staffordshire on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information, we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Supported Living Staffordshire

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service provides care and support to people living in 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support. This service is also a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 9 November 2022 and ended on 10 November 2022. We visited the location's office on 9 November 2022.

What we did before the inspection

We reviewed information we had received about the service since it had registered with us, including notification the provider had sent to us. We also gathered feedback from the local authority.

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

During our inspection we spoke with 1 person and 4 relatives. We received a further 3 emails with feedback from people receiving care. We also spoke with the registered manager, 2 of the supported living managers and 2 care staff. We looked at the care records for 5 people. We checked the care they received matched the information in their records. We looked at records relating to the management of the service, including audits carried out within service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- We found there were procedures in place, so people were protected from potential abuse. When needed concerns had been raised in line with these procedures so they could be appropriately investigated.
- Staff knew how to recognise and report potential abuse as they had received training. One staff member told us, "We have safeguarding training, we look out for any signs of abuse and report anything we are concerned about." Staff we spoke with told us they were confident any concerns raised would be actioned by the registered manager.

Assessing risk, safety monitoring and management

- People told us they felt safe. One person said, "There is an alarm on my door which helps me to feel very safe." Relatives we spoke with raised no concerns about people's safety.
- Risks to people health and well-being were considered, assessed and reviewed when incidents had occurred.
- Individual risks to people were also considered. For example, when people had specific health condition or periods of emotional distress, clear plans were in place for staff to follow. Staff we spoke with were aware of the plans and how to support people during these times.

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 MCA 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 to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Staff and recruitment

- People, staff and relatives confirmed there were enough staff available to support people. One person told us, "I have 24-hour care. I have a regular team of carers they are really good."
- There was system in place to ensure there were enough staff to support people. When people received assistance from 1, 2 or 3 staff this was provided for them.

- We saw pre employment checks were completed before staff could start working with people to ensure they were safe to do so.

Using medicines safely

- People and relatives raised no concerns with how their medicines were administered. One relative told us the staff always let them know when their relation had received 'as required' medicines.
- When people were prescribed 'as required' medicines there were clear procedures in place for administering these. Staff we spoke with were aware of these.
- Records we reviewed showed us people had received their medicines as prescribed.
- Staff had received training and their competency was checked before they were allowed to administer medicines, to ensure they were safe to do so.

Preventing and controlling infection

- People and relatives raised no concerns around staff practice in relation to infection control.
- Staff had received training and there were infection control procedures in place to guide staff on how to reduce the likelihood of the spread of infections.

Learning lessons when things go wrong

- The registered manager was able to demonstrate lessons had been learnt when things went wrong. There was a folder in place which showed examples. This included the action that had been taken following incidents, what could be done differently and how this information had been shared.
- Information was also shared with staff in the form of a newsletter, and learning was a regular item on the agenda to the staff meetings, where it was discussed. There was also a board displayed to show examples of this.

Is the service well-led?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements. Continuous learning and improving care

- There were a variety of audits in place to monitor the quality and safety of the service. These included medicines audits, infection control audits and the monitoring of people's care. Audits in place were clear and effective. Where action was needed to be taken, they identified this, so changes could be made.
- The registered manager had notified us about events that had happened within the service as they are required to do so.
- Staff understood their roles and responsibilities and there were clear lines of delegation.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and relatives were happy with the support and service they received. One person said, "I am 100% happy and I couldn't be happier with the service here. The staff are kind and caring." Another person told us, "I feel like if I have a bad day, I am able to express this. They [staff] help me feel better and think positive."
- Staff worked closely with people and their relatives to ensure good outcomes were achieved. One relative told us there was a care planning meeting every 2 months which they were involved with. We saw people were involved with their care planning and review meetings.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Feedback was sought from people who used the service, in the form of surveys, reviews and care meetings. The feedback received was positive.
- Staff attended supervisions and team meetings so that they could share their views. They felt involved with the company and the care people received. They also felt it was nice place to work and felt supported and listened to.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Duty of candour requirements were understood and met by the registered manager.
- When incidents or areas of concern had happened in the service, the registered manager was open and honest and had shared this information with the relevant people.

Working in partnership with others

- The service worked closely with other agencies to ensure people received the care they needed. This included social workers and nurses.