

Potensial North East Supported Living Northwest Domiciliary Agency

Inspection report

10 Forge Close
Westhead
Ormskirk
Tel: 01695 573059
Website:

Date of inspection visit: 08/01/2015
Date of publication: 30/03/2015

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 

Overall summary

Northwest Domiciliary Agency office is situated in a quiet residential area of Ormskirk, West Lancashire. The agency currently provides a supported living service for people with learning disabilities and mental health needs. However, it is registered to also provide personal care within people's own homes in the community. The service supports people to live as independently as possible. The office is located on the site of a formerly registered care home, which is now a supported living service managed by the domiciliary agency. Pleasant

views of the surrounding countryside are enjoyed by those who live in the group home. Limited parking spaces are available at the agency office. However, on road parking is also permitted. Surrounding areas are accessible by public transport, which is within easy reach. Northwest Domiciliary Agency is owned by Potensial North East Supported Living and is regulated and inspected by the Care Quality Commission.

Summary of findings

This inspection was conducted on 8 January 2015 by a lead Adult Social Care inspector from the Care Quality Commission. The provider had been given short notice of our planned visit, in accordance with our inspection methodologies of Domiciliary Care services.

The registered manager of the agency was on duty at the time of our inspection. She had been in post for 15 years, although had worked at this service for 25 years. 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.

At the time of this inspection there were three adults using the service, who were sharing supported living accommodation, as tenants of the property, which was located on the same site as the agency office. We were able to visit these people and with their agreement spend some time with them in their own home, chatting about their experiences of receiving a domiciliary support service and finding out what life was like living in a shared environment. We were also able to speak with a relative who was visiting on the day of our inspection, as well as two members of staff and the registered manager of the service.

We received positive comments from everyone we spoke with. We looked at a wide range of records, including the care file of one person who used the service and the personnel record of a staff member. We observed daily activities and looked at how staff interacted with people they supported.

People who used this service were safe. The staff team were well trained and had good support from senior managers. They were confident in reporting any concerns about a person's safety and were competent to deliver the care and support needed by those who used the service.

Records showed that relevant checks had been conducted to ensure new staff members were suitable to work with this vulnerable client group. Records seen were well maintained, making information easy to find.

The home of those we visited was safe and maintained to a good standard. Good examples were provided of structural changes made, so that people who lived there could experience a more comfortable lifestyle. This helped people to maintain their independence and protect them from harm.

The planning of people's care was based on an assessment of their needs, with information being gathered from a variety of sources. Evidence was available to demonstrate that people had been involved in making decisions about the way care and support was delivered. This was supported by a robust person centred care planning system.

Regular reviews of needs were conducted with any changes in circumstances being recorded well. Areas of risk had been identified within the care planning process and strategies had been recorded. People's privacy and dignity was consistently respected. Staff were kind and caring towards those they supported and people who used the service looked comfortable in the presence of staff members.

People who used the service were evidently involved in the choice of menu options and were fully involved in shopping for food and the preparation of meals.

Staff we spoke with told us they received a broad range of training programmes and provided us with some good examples of modules they had completed. They confirmed that regular supervision sessions were conducted, as well as annual appraisals.

Staff spoken with told us they felt well supported by the manager of the agency and were confident in her management style. They felt she maintained a stable management structure, which enhanced the quality of service provided.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

This service was safe.

Only suitable people were employed to work with this vulnerable client group. There were sufficient staff deployed at all the times of day and night, who were aware of people's individual needs and any associated risks.

Robust safeguarding protocols were in place and staff were confident in responding appropriately to any concerns or allegations of abuse. People who used the service were protected by the emergency plans implemented at Northwest Domiciliary Agency.

People were supported to consistently maintain their independence and to take risks, within a risk management framework and through informed choice. People were supported in a safe way and the practices of the agency staff protected them from harm.

Good



Is the service effective?

This service was effective.

The staff team were well trained and knowledgeable. They completed a detailed induction programme during the first few months of employment, followed by mandatory training modules, regular supervision and annual appraisals.

People's rights were protected, in accordance with the Mental Capacity Act 2005. People were not unnecessarily deprived of their freedom because legal requirements were being followed.

People were able to choose what they ate and their nutritional requirements were being met.

Good



Is the service caring?

This service was caring.

Staff interacted well with those who used the service. People were fully involved in planning their own care and were provided with the same opportunities, irrespective of age, disability or belief.

People were supported to access advocacy services, should they wish to do so. An advocate is an independent person, who will act on behalf of those needing support to make decisions.

People were respected, with their privacy and dignity being consistently promoted. They were supported to remain as independent as possible and to maintain a good quality of life.

Good



Is the service responsive?

This service was responsive.

People received person centred care. An assessment of needs was done before a placement was arranged. Plans of care reflected people's needs and how these needs were to be best met. Regular reviews were conducted, with any changes in circumstances being recorded well.

People were supported to maintain links with the local community by accessing various leisure activities of their choice, either independently or accompanied by a member of staff.

Good



Summary of findings

People we spoke with told us they would know how to make a complaint should they need to do so and staff were confident in knowing how to deal with any concerns raised.

Is the service well-led?

This service was well-led.

There was a sound management structure in place and people we spoke with were fully aware of the lines of accountability and who they should speak with about specific areas. Staff spoken with felt well supported and were very complimentary about the way in which the agency was managed.

There was a good system in place for assessing and monitoring the quality of service provided, with lessons learnt from any shortfalls identified.

The agency worked in partnership with other people, such as a wide range of external professionals, who were involved in the care and treatment of the people who used the service.

Good



Northwest Domiciliary Agency

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 provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008. We also looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

We last inspected this location on 10 October 2013, when we found the service was meeting all the regulations we assessed.

The provider had been given short notice of this inspection, in accordance with our domiciliary care methodologies. This inspection was conducted on 8 January 2015 and was carried out by a lead inspector from the Care Quality Commission.

Prior to this inspection we looked at all the information we held about this service, such as notifications informing us of significant events, such as serious incidents, reportable accidents, deaths and safeguarding concerns.

The registered manager of the service had 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. Before our inspection we reviewed the information provided within the PIR.

We asked people who were involved with the service for their views about the overall operation of the agency, such as GP's, district nurses, social workers and a psychiatrist.

During this site visit we spoke with 3 people who used the service and one relative. We interviewed two members of staff and the manager. We pathway tracked the care of one person who used the service. Pathway tracking is a method we use to look at the care and support people need and that which is provided from the time a referral is made to the present day.

With the agreement of the three tenants we toured the premises we visited, viewing their bedrooms and the communal areas of the house. We observed the day-to-day activity and we looked at a wide range of records, including one care file, a variety of policies and procedures, training programmes, medication records, a staff personnel file and quality monitoring systems.

Is the service safe?

Our findings

All those we spoke with told us they felt safe using the services of Northwest Domiciliary Agency and that staff were kind and caring towards them. We noted people looked comfortable in the presence of staff members, without any indication of fear or apprehension. People looked happy and content. We saw staff members talking with people in a respectful manner. We saw a night care worker address each person as she left their house following her shift, informing them of when she would be next on duty.

Records showed the turnover of staff was very low. The most recently appointed member of the team was employed by the agency four years previously. We spoke with this staff member, who talked us through her recruitment process. Her personnel records showed all relevant checks, such as written references and Disclosure and Barring Service (DBS) checks had been conducted before she started to work for Northwest Domiciliary Agency. DBS disclosures were routinely rechecked every three years for all staff members. DBS checks replaced the Criminal Record Bureau disclosures. These checks help to ensure potential employees are suitable and fit to work with vulnerable people

Staff members told us there were sufficient numbers of staff on duty to meet the needs of those who used the service. People we spoke with told us staff always had time to listen to them and regularly made time to have a chat. This was supported by our observations during the inspection.

Staff members spoken with were fully aware of the policy, in relation to safeguarding adults, which covered the Mental Capacity Act 2005. Staff told us they were confident in reporting any allegations of abuse or concerns raised and were aware of the procedures to follow. Nobody whose records we check, or who we spoke with was subject to unlawful restrictions.

We observed good practices had been adopted by the agency in order to promote people's health, welfare and safety. For example, one person was going out into the community independently. Staff ensured she was well prepared for her outing, so that her health, safety and wellbeing were promoted.

Accidents were documented accurately and records were maintained in line with data protection guidelines. This helped to ensure personal information was retained in a confidential manner. The care planning process enabled a risk management framework to be developed in support of each plan of care generated. These helped to ensure people were protected from harm.

Personal Emergency Evacuation Plans were in place. This helped to ensure people would be evacuated from their home by using the most appropriate method for the individual, should the need arise. Clear policies and procedures were in place, which provided staff with guidance about action to take in the event of an emergency situation arising.

At the time of our inspection we toured the house we visited, with the agreement of the three tenants. We found the environment to be comfortable and very well maintained. It was clean and hygienic throughout without any unpleasant odours. This helped to ensure people lived in safe surroundings. Although a passenger lift was not installed a ground floor bedroom and wet room were available for anyone having difficulty in accessing the stairs to the upper floor.

We looked at the systems for medication management. We saw clear audits were regularly conducted and detailed policies and procedures were in place at the agency office, which covered areas, such as ordering, receipt, storage, administration and disposal of medications. Medication processes were well organised and safe. Records were clear and appropriately signed. Specific plans of care had been developed in relation to people's medication needs, including situations where people who used the service were prompted to take their prescribed medication, rather than staff administering it for them. These were supported by assessments, which identified any potential risks and outlined strategies, which had been implemented to protect people from harm. Records showed that all staff had received medication training and competency assessments were periodically conducted. The registered manager told us that the service had a good working relationship with the supplying pharmacist, who was willing to give advice when needed. One person who used the service was working towards self-medicating and staff were carefully supporting her to achieve her desired outcome.

Is the service effective?

Our findings

At the time of this inspection we spoke with three people, who lived in the same property as tenants. They told us their needs were always met in the way they wanted them to be. They told us they were happy using the service and enjoyed living with the other tenants.

We saw there were detailed policies and procedures in place in relation to the Mental Capacity Act 2005, which provided staff with clear, up to date guidance about current legislation and good practice guidelines.

All new employees were guided through the common induction standards programme, which covered important areas, such as the role of the health and social care worker, personal development, effective communication, equality and inclusion, health and safety, safeguarding and person centred support. Records showed the induction process was thorough, so that all new staff were given the same opportunities. Staff were supported well by being provided with a lot of information when they started to work for the agency. For example, all new employees received job descriptions specific to their role, terms and conditions of employment, the staff handbook and the relevant codes of conduct. Together this information advised staff about what was expected of them whilst they worked for Northwest Domiciliary Agency.

Staff spoken with told us meetings were held, so the staff team could get together and discuss any areas of interest in an open forum. This also allowed for any relevant information to be disseminated to staff members. Records seen confirmed this information to be accurate. However, it was evident the registered manager was visible throughout the day and it was confirmed that she worked closely with the small staff team on a day to day basis. This helped to ensure staff continued to be competent in their role and were able to discuss any concerns with the registered manager at any time.

Staff spoken with told us they had regular individual supervision meetings and annual appraisals with the registered manager. Records showed these covered areas such as, work performance, concerns, team issues and staff training and development. These areas were supported by an organised action plan and expected outcomes.

Staff personnel records showed written knowledge checks and competency assessments were regularly completed in certain areas and staff spoken with discussed their training programmes with us. We were told these covered a wide range of areas, such as fire awareness, Mental Capacity Act (MCA), Deprivation of Liberty Safeguards (DoLS), safeguarding adults, infection control and health and safety. One member of staff told us she was currently doing a recognised national qualification in care and the registered manager told us this staff member's file was being used as a good example of how the award should be done. This information was supported by individual training records and training certificates retained on each staff personnel file. We were told these examples were annual mandatory training courses, but staff confirmed that additional training was also provided specific to the needs of those who used the service, such as diabetes, dementia care and mental health.

People we spoke with told us they were able to choose what they wanted to eat at each mealtime. On the day of our inspection one person was accompanied by a staff member on a shopping trip to the local supermarket to replenish food supplies for the three tenants of the supported living accommodation.

During our inspection we toured the premises of the house we visited. It was comfortable and homely throughout. Tastefully decorated and well-furnished lounges and dining room were available. We noted one bathroom had been structurally altered to accommodate a previous tenant, who needed space to manoeuvre his wheelchair. This demonstrated an effective service was provided in accordance with the assessed needs of those who used the service.

The tenants agreed for us to look in their bedrooms. These were found to be tastefully decorated, in accordance with people's preferences and the décor suited each individual's personality. Personal accessories adorned the bedrooms, such as co-ordinating bedding, pictures, photographs, ornaments and music collections. Flat screen televisions and music equipment was available in each bedroom. One person had a massage chair and a wide selection of DVDs. Although the bedrooms did not have en-suite facilities, well designed bathrooms and toilets were available on both floors.

Is the service caring?

Our findings

Northwest Domiciliary Agency is a small service and, as a result staff we spoke with knew those in their care very well and from speaking with them it was clear they understood people's individual ways and specific needs.

We saw staff treating people with respect and providing assistance in a kind and caring manner. It was quite evident that staff members and those who used the service had easy and friendly relationships. People did feel that staff listened to them and considered their wishes. Staff we spoke with were fully aware of people's needs and how they wished care and support to be delivered. A visitor told us she was more than happy with the support her relative was receiving from Northwest Domiciliary Agency.

People we spoke with confirmed they were given the opportunity to make a range of decisions about the care and support they received and the plan of care we saw supported this information. People were supported to access advocacy services, should they wish to do so. An advocate is an independent person, who will act on behalf of those needing support to make decisions, if the individual so wishes.

Information was available for staff, which outlined areas, such as equality, diversity and inclusion. Staff members had signed to indicate they had read and understood

certain written policies and procedures. This helped to ensure everyone who used the service was provided with the same opportunities, irrespective of their age, disability or beliefs.

People told us their independence was encouraged in a positive way and their privacy and dignity was consistently promoted. Assistance was carried out with respect and consideration. We observed people contributing towards the daily routines of the supported living service. For example one person made her own breakfast and then washed the dishes, another went with a member of staff to do the shopping and a visually impaired person dried the dishes. This helped to maintain people's independence and supported them to complete meaningful tasks. On the day of our visit one person went to a luncheon club unaccompanied. She was confident in using public transport to access the surrounding areas. She told us, "I like living here. It is the best place I have ever lived before."

People we spoke with told us they did not have to wait for assistance from staff when it was requested and they expressed their total satisfaction with every aspect of care and support provided by Northwest Domiciliary Agency. A relative commented, "The staff are marvellous. They are extremely kind." Information for those who used the service was available in different formats, such as pictograms and audio tapes. This provided everyone with the same opportunities, irrespective of their specific disabilities.

Is the service responsive?

Our findings

On our arrival to the supported living service we were greeted by the people who lived there. One person was eager to make us a cup of tea and another was having her hair done by a member of staff. Our immediate impression was that of a well organised, caring service, where staff focussed on people's wishes and daily choices.

A wide range of external professionals were involved in the care and support of those who used the service, so that people received the health care and treatment they required. We asked eight of these people for their feedback about the quality of service provided by Northwest Domiciliary Agency. We received four responses, which provided us with consistently positive comments, such as, 'I have found the whole service to be very proactive in getting to know my client and her family. They made sure there was every opportunity for my client to visit and spend time with the other ladies there. They looked at ways that meetings could be arranged and they spent a considerable amount of time talking with and explaining various issues with my client's sisters.' And 'I have found the staff to be very professional and caring. The tenants have been very lucky to have had continuity of staff over the years, which has made a big difference to them and the feel of the house. The staff know each person extremely well.' People we spoke with said they were able to see a doctor when they needed to do so and that this was arranged by staff members, on their behalf.

We looked at the records of the most recent person to use Northwest Domiciliary Agency. This file was very well organised, making information easy to find. We chatted with the person whose records we examined and discussed the care and support they received. It was clear that careful consideration had been given for a gradual introduction to the other tenants and members of staff. This person told us that staff helped her to settle in and were very supportive of her needs.

Needs assessments had been conducted before a package of care was arranged. This helped to ensure the staff team were confident they could provide the care and support required by each person who used the services of Northwest Domiciliary Agency.

Plans of care had been developed from the information obtained at the assessment stage and also from other

people involved in providing support for the individual. The needs of people had been incorporated into the plans of care well. These had been generated with the involvement of the person who used the service and their relatives, if appropriate and regular reviews had taken place, with any changes in need being recorded well.

We found the plan of care to be a well written, person-centred document. This helped the staff team to develop a clear picture of this individual's assessed needs and how she wished her care and support to be delivered.

A system was in place for recording complaints, although none had been received at the time of our visit to this location. A clear policy was available, which outlined the process for making a complaint, with timescales for action to be taken. People we spoke with told us they would feel confident in reporting any concerns to the manager of the agency or to a member of the staff team. A relative confirmed that she would be able to make a complaint, if she needed to do so.

The staff of Northwest Domiciliary Agency were seen to be supportive in helping people to maintain outside contacts and enabling them to continue to engage in their hobbies. One person we spoke with outlined her weekly activities, which involved daily contact with the local community, including both voluntary and paid work, as well as being a member of different groups and joining outings with her work colleagues. People were also involved in church meetings and religious services. This helped to ensure people's religious needs were being met. One person showed us the pieces of knitting she had completed and told us she enjoyed living with the other tenants. She said, "We all get along very well."

People who used the service told us they were happy living in this group home and were satisfied with the activities provided. Staff supported each person to maintain their weekly commitments and to achieve their goals and aspirations. One person told us about the annual holidays they had experienced and another was eager to arrange some activity for a co-tenants forthcoming birthday. We were told a meeting had been organised so the 'birthday girl' could decide how she wanted to spend her birthday.

The visitor of one person, who used the service, told us that she did not live in the region, but she visited regularly and took her relative out for lunch. She told us the family were

Is the service responsive?

happy with the care and support their relative received and were impressed with the progress she had made since she moved into the supported living accommodation run by Northwest Domiciliary Agency staff.

One person who lived in the supported living accommodation said, "It is really lovely here. The staff are really nice." Her relative commented, "(Name removed) is so very happy. We, as a family are so relieved. She is able to live life to the full. She has even started making her own decisions, which she never did before she came to live here. For example, she decided she wanted to stay here on

Christmas day with her friends, rather than come to one of her family. We were shocked, because she would never have done this before, but we were happy she had made that decision, as she is obviously very settled living here." This relative told us the staff set up Skype for her, so she could speak with and see her relatives, particularly the children on Christmas day. She added, "It is just like a loving family. (Name removed) could not be any happier. We are so delighted and reassured that she is being well looked after."

Is the service well-led?

Our findings

The atmosphere in the house we visited was relaxed and happy. The surroundings were comfortable with no unpleasant smells. Everyone we spoke with considered Northwest Domiciliary Agency to be well run under the leadership of the long serving registered manager.

A service development plan was in place. This covered areas such as, the aims and objectives of the agency, quality monitoring systems, staff training programmes, budgetary control, social care commitments, complaints and recruitment of staff. This was supported by a detailed action plan and expected outcomes.

The agency focused on a culture of openness and transparency. There was a good system in place for assessing and monitoring the quality of service provided, which identified any shortfalls, so that actions could be taken to better any areas in need of improvement.

The registered manager was evidently fully aware of her role and very much involved in the support people needed. She was able to discuss people's needs well and those who used the service were aware of the management structure of Northwest Domiciliary Agency. The registered manager had been in post for 15 years, although she had worked for the agency for 25 years. People we spoke with felt the agency was well managed and their opinions and wishes were taken into consideration.

Staff spoken with told us they felt well supported by the registered manager of Northwest Domiciliary Agency. One commented, "The manager is here every day and she is very approachable." Another told us, "The manager is lovely. She is very approachable. I can talk to her about anything."

A variety of surveys had been conducted for those who used the service, their relatives, staff members and stakeholders in the community. This allowed the provider to obtain feedback from a wide range of people with an interest in Northwest Domiciliary Agency. The results were, in general positive and these were produced in a percentage format, for easy reference. A quality assurance survey report was then generated from the information obtained. This allowed the views of people to be shared with other interested parties. Extracts from the surveys

included statements, such as, 'If you have something bothering you, you can always go to the staff'; and 'I like the amount of opportunities. I can decide what or if I want to join in.'

We were told the area manager visited the Agency office and the supported living accommodation regularly and conducted an inspection, which was followed by a report of her findings. This information was confirmed as accurate by the records we saw.

A wide range of quality audits and risk assessments had been regularly conducted by the registered manager. For example, monthly health and safety checks, medication monitoring, infection control audits, night time checks and first aid awareness. Records showed the quality of the service had been reviewed, and if necessary improvements made from these quality monitoring tools.

It was established that a variety of meetings were held periodically for those who used the service and agency workers. This allowed relevant information to be disseminated to those involved and encouraged people to discuss any topical issues in an open forum.

A wide range of updated policies and procedures were in place at the agency office, which provided staff with clear information about current legislation and good practice guidelines. This helped the staff team to provide a good level of service for those who used the services of Northwest Domiciliary Agency. However, there was no policy available to provide staff with clear guidance about the importance of maintaining people's privacy and dignity and promoting their choice and independence. The agency had been accredited with an external quality award. This showed that an outside organisation periodically assessed the quality of service provided.

A visitor told us she was confident the service was well managed and her relative was receiving a good quality of service. She commented, "This is her home, where she lives with her extended family."

The registered manager told us the company had implemented a cross-checking system across services owned by the same organisation within the region. This involved a registered manager from a different service visiting Northwest Domiciliary Agency and auditing a range of different areas. This meant there was external oversight and checking of the quality of the service to ensure people received good care.