

Friendly Support Services Limited

# Friendly Support Services Limited

## Inspection report

Barratt House  
Kingsthorpe Road  
Northampton  
Northamptonshire  
NN2 6EZ

Tel: 01604720699

Website: [www.nursesfriend.co.uk](http://www.nursesfriend.co.uk)

Date of inspection visit:

26 July 2017

27 July 2017

Date of publication:

11 September 2017

## 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

Friendly Support Services Limited provides supported living to four people living in Northamptonshire. This service supports people with learning disabilities, acquired brain injuries and physical disabilities. At the last inspection in July 2015, the service was rated Good. At this inspection we found that the service remained Good.

People continued to receive safe care and support. Staff were knowledgeable about the risks to people and effective plans of care had been developed to guide staff in mitigating people's known risks.

People could be assured that sufficient numbers of staff were available to provide their care and that they would receive their prescribed medicines safely. People were supported by staff that knew them well and had received the support, supervision and training that they needed to provide effective care.

People were supported to maintain adequate nutrition and staff promptly referred people to medical professionals when required.

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

People were treated with dignity and respect and could be assured that they would be supported to pursue their interests and hobbies. Staff were committed to providing care according to people's individual preferences.

There was a strong system of quality assurance overseen by a visible and supportive management team. People felt able to approach the management team and they actively promoted a person centred culture that was focused upon people's strengths.

Further information is in the detailed findings below.

## 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 ●

This service continues to be good.

### Is the service effective?

Good ●

This service continues to be good.

### Is the service caring?

Good ●

This service continues to be good.

### Is the service responsive?

Good ●

This service continues to be good.

### Is the service well-led?

Good ●

This service continues to be good.

# Friendly Support Services Limited

## **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 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 was a comprehensive inspection that was completed by one inspector on 26 & 27 July 2017 and was announced. The provider was given notice because the service was small and we needed to be sure that someone would be in.

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. The provider returned the PIR and we took this into account when we made judgements in this report.

We also reviewed other information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about, and information that had been sent to us by other agencies. This included the local authority who commissioned services from the provider.

During our inspection we spoke with two people who used the service and four members of staff including the registered manager, team leader and care staff. We looked at records and charts relating to three people and three staff recruitment records. We looked at other information related to the running of and the quality of the service. This included quality assurance audits, training information for care staff, staff meeting minutes and arrangements for managing complaints.

During our inspection we observed how staff interacted with people who used the service.

# Is the service safe?

## Our findings

People told us that the care that staff at Friendly Support Services provided continued to maintain people's safety. One person told us, "The staff are good; all good." People received care from a dedicated and caring team of staff who knew people well and knew how they preferred to be supported. One of the care staff told us "I have supported [name of person] for eight years; I know how she likes to be supported, her sense of humour and how she communicates when she isn't happy about something." Staff had been subject to robust recruitment procedures to ensure that they were of a suitable character to support vulnerable people living in their own homes. One person received two to one support and staff told us and records showed that this was always provided.

Risks to people had been assessed and regularly reviewed and detailed plans of care had been developed to guide staff in mitigating people's known risks. People were protected from the risk of harm because staff were confident in recognising if people were at risk and knew how to report their concerns. One member of staff told us "I feel confident in raising any concerns about people's safety; I would tell the manager or the directors." Safeguarding notifications had been raised when required and investigations had been completed in a timely manner.

People could be assured that they would receive their prescribed medicines at the right time and medicines management systems that were in place were clear and consistently followed. People were not able to tell us about their medicines but we spoke with the care staff who administered medicines and viewed medication administration records. Staff had received training in the safe administration of medicines and had been observed by the registered manager to ensure that they were competent in administering medicines to people.

## Is the service effective?

### Our findings

People were supported by staff that continued to receive the training, support and supervision that they required to provide effective care and support to people. Staff training was relevant to their role and equipped them with the skills they needed to care for people they were supporting. For example, all staff supporting one person had received specialist acquired brain injury training and were supported by the multi-disciplinary team to put what they had learnt into practice. All staff had regular supervisions and annual appraisals were planned for the forthcoming months. One staff member said "I receive regular supervision; we can also contact the manager or the on-call person if we ever have any concerns." We viewed a supervision chart and noted that all staff had received regular supervision in line with the provider's policy.

People had access to health care services and received on-going health care support to maintain good health. Care staff were vigilant of changes in people's health and made referrals to health professionals promptly. For example, we saw that one person had been referred to the speech and language team because of recent difficulties in swallowing. An assessment had taken place with the person and a follow up appointment was in place.

People were supported to maintain good nutrition. One person showed us the picture bank of meals that they used to assist them with menu planning. Another person we spoke with confirmed that they were supported to purchase their groceries on a weekly basis and the food purchased was of their own choosing.

People's capacity to make decisions about their care and treatment was assessed and where appropriate "best interest" decisions were made on people's behalf. Records showed these decisions involved relevant professionals as well as the person's family or representative. Formal consent to care and treatment was also captured in people's records. One member of staff told us "We always give people choices. Some of the people we support need lots of encouragement to make choices but it's important that we do this." People who did not have capacity to manage their finances had appointee's to support them.

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.

## Is the service caring?

### Our findings

People developed positive relationships with staff and they were treated with kindness, compassion and respect. Feedback we received from a relative included "Thank you for the excellent care and attention you gave to [my relative]." Another relative's feedback included "[My relative] is very happy and always looked after very well." We observed the interaction between staff and people and it was evident that people felt comfortable in the presence of staff. Staff were knowledgeable about people's individual needs, backgrounds and personalities. They explained how they involved people in making decisions. Care plans were written in a person centred way, outlining for the staff how to provide individually tailored care and support. The language used within people's care records was informative and respectful.

People told us that their choices in relation to their daily routines and activities were listened to and respected by staff; for example one person went swimming on a weekly basis and they also liked their relative to join them; care staff ensured that swimming was scheduled at a time to suit both the person and their relative.

People were treated with dignity and respect. We saw that people were asked discreetly if they required any support. Care staff were able to describe how they supported people to maintain their privacy. One care staff said "I always make sure that curtains are closed and the door is closed; also when supporting someone with personal care I always ensure that they are happy for me to carry out the task."

We spoke with the registered manager about access to advocacy services should people require their guidance and support. The registered manager told us the service provided information about advocacy services on commencement of their service. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf if needed.

## Is the service responsive?

### Our findings

People had detailed plans of care in place that provided guidance to staff in relation to people's interests, care and support needs. People and where appropriate their relatives and other health and social care professionals were involved in developing their detailed care plans. Staff knew people very well; their backgrounds and what care and support they needed. One person showed us their photograph album which was used to communicate with staff who the person wanted to make contact with. A member of staff told us "Care plans are updated when things change like people's routines or care needs." One health professional told us that the registered manager ensures that all staff know the people who use the service really well and this is key to the positive relationships that people and staff have.

People were encouraged and supported to pursue their hobbies and interests. One person told us that they visited the local working men's club and the local gym with the support from care staff on a regular basis. Another person told us they went to a day centre, cinema, swimming, local clubs and discos and a whole variety of other activities. One staff member told us "We are here to support [the person] with everything they want to do."

People could be assured that their concerns and complaints would be managed appropriately. We saw that complaints and concerns were encouraged and people using the service felt confident in making complaints. We viewed the records relating to complaints and we saw that each complaint had received a written timely response and clearly set out what actions could be taken to support the person to find a resolution. We saw that there was a clear complaints policy in place. Records were maintained of all the issues that had been raised with the manager and detailed actions that had been taken.



## Is the service well-led?

### Our findings

At the last inspection in July 2015 there was not a registered manager in post. At this inspection a registered manager was 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.'

The registered manager and provider created and promoted a positive person centred culture. People benefited from receiving care from a team of people who were committed to providing the best possible care and support they could, which was consistent and could be relied upon.

The provider was committed to providing a person centred service that enhanced people's sense of well-being and was aspiring to provide a consistently good service to people. There was a robust system of quality assurance with audits completed in key areas such as care plans, finances, medicines and health and safety. When areas for improvement had been identified these were targeted and improvements were monitored.

People, their relatives and staff were able to feedback their thoughts on the quality of the service provided. Annual satisfaction questionnaires were completed by people who used the service and their relatives if people consented to this. Feedback from a relative included "Thank you for the excellent care." We also received positive feedback from the staff about the registered manager; this included how supportive the registered manager had been and how accessible the registered manager and directors were.

Records were maintained and used in accordance with the Data Protection Act. The registered manager had notified the CQC of all significant events, changes or incidents which had occurred at the service in line with their legal responsibilities. Statutory notifications were submitted in a timely manner and the most recent Care Quality Commission rating was displayed at the location and on the providers website as required.