

Mr Abdul Haleem

# Northants Accommodation and Social Care

## Inspection report

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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

### About the service

Northants Accommodation and Social Care provides accommodation and personal care for up to five people who live in self-contained flats and access the community independently. At the time of inspection there were four people using the service.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

Staff understood their roles and responsibilities to safeguard people from the risk of harm. People were supported to access relevant health and social care professionals.

Staff supported some people to take their medicine. The registered manager recognised the importance of making clear records to ensure this was documented. People's risks were assessed at regular intervals or as their needs changed. Care plans informed staff how to provide care that mitigated these known risks.

People received care from staff they knew. Staff had a good understanding of people's needs, choices and preferences. People were encouraged to make decisions about how their care was provided and their privacy and dignity were protected and promoted. Staff gained people's consent before providing personal care.

People were involved in the planning of their care which was person centred and updated regularly. People were supported to express themselves, their views were acknowledged and acted upon. There was a complaints system in place and people were confident that any complaints would be responded to appropriately.

Staff were recruited using safe recruitment practices. Staff received training to enable them to meet people's needs and were supported to carry out their roles.

The management team monitored the quality of the service, identifying issues and making changes to improve the care provided.

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.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was Good (published 7 July 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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?

The service was safe.

Details are in our Safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our Effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our Caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our Well-Led findings below.

Good ●

# Northants Accommodation and Social Care

## **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 Care Act 2014.

### Inspection team

The inspection was undertaken by one inspector.

### Service and service type

People at this service receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

### Notice of inspection

This inspection was unannounced.

Inspection activity took place on 23 December 2019.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key

information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with one person who used the service and viewed their accommodation. We spoke with three members of staff including the registered manager, assistant manager and a care support worker.

We reviewed a range of records. This included three people's care records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We spoke with one relative about their experience of the care and support provided.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff received training in safeguarding vulnerable adults. They demonstrated they understood their responsibilities to protect people from the risks of harm and abuse.
- The provider's safeguarding policy guided staff on how to raise referrals to the local authority safeguarding team.
- Safeguarding alerts had been raised appropriately and staff had worked with other professionals to keep people safe.

Assessing risk, safety monitoring and management

- People's risks were assessed at regular intervals or as their needs changed. Care plans informed staff how to provide care that mitigated these known risks. Staff were kept up to date with changes in people's care during handovers and team meetings.
- Staff promoted independence and encouraged people to make decisions and manage their own risks.
- Staff clearly recorded concerns on specific paperwork, separate from people's daily logs. This ensured information was easily accessible by other staff and allowed managers to have an overview of people's current risks.

Staffing and recruitment

- A small long-standing staff team and no use of agency staff meant people received care from a regular group of staff who knew them well.
- Safe recruitment and selection processes were followed. Staff files contained all the necessary pre-employment checks which showed only fit and proper applicants were offered roles.
- All employees' Disclosure and Barring Service (DBS) status had been checked. The Disclosure and Barring Service carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions.

Preventing and controlling infection

- Staff supported people to manage their personal hygiene in line with their own choices and needs.
- People were protected from the risks of infection by staff who received training in infection prevention and control.
- Staff followed the provider's infection prevention procedures by using personal protective equipment (PPE) such as gloves and aprons.

Using medicines safely

- People were assessed for their abilities to manage their own medicines.
- Where people required support with their medicines, staff provided this. However, Medicines Administration Records (MAR) were not being used to ensure clear records were made when people had taken their medication. We discussed this with the registered manager who took immediate action to put MARs in place.

#### Learning lessons when things go wrong

- The management team were pro-active in using information from incidents and safeguarding alerts to improve the service. The managers worked with staff to understand how things went wrong and involved them in finding solutions.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed before they commenced using the service to ensure staff understood people's needs and preferences.
- Assessment documentation showed all aspects of a person's needs were considered including the characteristics identified under the Equality Act and other equality needs such as people's religious and cultural needs.
- Staff used evidence-based tools to assess people's risks and needs to ensure assessments were accurate.

Staff support: induction, training, skills and experience

- New staff received an induction which provided them with a good foundation of knowledge and understanding of the organisation and their roles.
- Staff received training in different ways, including face to face and online to ensure that they had access to information they fully understood.
- Staff received regular supervision and guidance to support them in their roles. Staff told us their manager was very supportive.

Supporting people to eat and drink enough to maintain a balanced diet

- Care plans included information about people's food preferences and staff supported people to cook and eat the food they wanted.
- Staff had training in nutrition and food hygiene and encouraged people to prepare balanced meals to help maintain their health and well-being.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People were supported to make healthier life choices such as diet and exercise.
- We saw staff supported people to attend health appointments and referred people promptly to their GP or other medical services when they showed signs of illness.
- Records showed staff worked closely with other social care professionals to ensure people's needs continued to be met.

Ensuring consent to care and treatment in line with law and guidance

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 to receive care and treatment when this is in their best interests and legally authorised under the 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 checked whether the service was working within the principles of the MCA were being met.

- Staff demonstrated they understood the principles of MCA, supporting people to make choices.
- Everyone using the service was able to make decisions relating to their care and daily living. Staff were aware of signs to look when this may have changed, and we saw they had taken appropriate action when they had concerns.

Adapting service, design, decoration to meet people's needs

- People lived in self-contained spacious flats in one adapted building. They had free access to a shared activities room with tv, pool table and kitchen area.
- The building was well-maintained. People's flats were personalised with items they had brought with them and pictures they had chosen.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People received care from staff who knew them well. People valued the good relationships they had with staff.
- People and relatives told us staff were kind and friendly. One person described the staff as 'exceptional'.
- Staff took pride in people's progress and spoke positively about the people they cared for.
- Staff understood the importance of promoting equality and diversity. Care plans contained information about people's religious beliefs and their personal relationships with their circle of support.

Supporting people to express their views and be involved in making decisions about their care

- People were involved in the planning of their care; their care plans clearly showed how people preferred to receive their care.
- People were encouraged to express their views and their opinions were wholly respected.

Respecting and promoting people's privacy, dignity and independence

- Staff supported people to maintain their dignity. One person told us "They give me the support I need without being intrusive."
- People's independence was promoted. Staff ensured people were encouraged to do as much as they could for themselves.
- People's information was stored securely within the office, and all staff were aware of keeping people's personal information secure.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People and where appropriate, their relatives had been involved in creating and updating their care plans.
- People's care plans reflected their preferences and cultural needs. Their likes and dislikes were clearly recorded. Staff used this information to ensure people received their care in ways which suited them.
- People's care was planned and delivered in a person-centred way. Staff treated each person as an individual and considered people's personalities and previous lives. For example, people's careers and families were explored and recorded.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were helped to pursue their hobbies and pastimes. We saw that staff had bought people birthday gifts such as DVDs relating to their personal interests.
- People were included in all activities available within Northants Accommodation and Social Care, this enabled people to take part in hobbies, pastimes and new experiences which enhanced their lives and their well-being.
- Staff supported people to explore new interests such as volunteering and work-based placements.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Information was available in range of formats, for example, alternative languages.

Improving care quality in response to complaints or concerns

- There was a complaints procedure in place whereby complaints would be addressed in accordance with the provider's policy.
- There had not been any written complaints since the last inspection. One verbal complaint had been dealt with appropriately and resolved quickly.

End of life care and support

- The service supported younger adults who live independently. No one was receiving end of life care at the time of our visit.

- People were given the opportunity to consider what was important to them at end of life and their wishes were clearly recorded in their care plan.

# 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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager promoted person centred care in all aspects of the service. Staff ensured the people they supported could achieve good outcomes and lead as independent a life as possible.
- Staff told us they were happy working at the service and felt supported by each other and the registered manager. One staff member told us, "We are a good team."

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; Continuous learning and improving care

- The registered manager was aware of their responsibility to keep people informed of actions taken following incidents in line with duty of candour.
- The management team supported staff to learn from incidents and actions taken.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements;

- The management team carried out regular audits and checks to ensure people continued to receive quality care. Where issues were identified, the managers acted to improve the service.
- The registered manager recognised there were areas of record keeping requiring improvement and acted immediately after the inspection to make the necessary changes.
- Policies and procedures were in place containing current and supported best practice.
- Staff attended meetings to discuss updates in policies and refresh knowledge.

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

- People were asked for their feedback during meetings. The registered manager sought the views of people's relatives and friends through surveys. Issues and suggestions were acted upon.
- Relatives told us the Registered Manager was approachable. One relative said, "I speak to [Registered Manager] quite a lot. [They] are quite upbeat, I always have a chat with them about how [person] is getting on."
- People's equality characteristics were considered when sharing information, accessing care and activities.

Working in partnership with others

- There was a close working relationship with people's GP, social services and health teams.
- The registered manager had built close links with the local police, who supported people to stay safe.