

Aspire 17 Limited

# Croft House and Cottages

## Inspection report

Croft House Barn  
Bolton  
Appleby-in-westmorland  
CA16 6AW

Tel: 01768347729

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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: Croft House and Cottages provides a supported living service for up to six people with learning disabilities and autism. There were five people using the service at the time of the inspection. The service is also registered to provide up to three short-break places in separate accommodation. At the time of this inspection there was no one using the short-break service.

People's experience of using this service: People received a personalised service from caring, compassionate staff. People had good relationships with staff and enjoyed being with them. Staff knew people's needs and preferences very well. Relatives said the staff were "kind, brilliant and "friendly" and that people had "blossomed" since using the service.

People were encouraged to make their own decisions and staff understood how people communicated their choices. People were supported to achieve independent living goals. Staff made sure that people were treated with dignity and respect and in a way that was free from discrimination.

Staff had had training and recognised the signs of abuse or neglect and what to look out for. Management and staff understood their role and responsibilities to report any concerns.

Staff understood how to keep each person safe although risk assessments did not always have enough information to make sure this was consistent. Medicines were administered in the right way but medicine records need further information to guide staff. These were immediately addressed at the time of the inspection.

The service had 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.

Relatives and external professionals said the service was well-run. They praised the values and ethos of the management and staff team. The service aimed to provide high quality, person-centred support for people to live fulfilled lives.

There were some areas of governance that needed to be developed. This related to clearer record keeping. We have made a recommendation about improving the clarity and detail in records.

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: This was the first inspection of Croft House and Cottages since it was registered on 14 May 2018.

Why we inspected: This was a scheduled inspection based on the registration date.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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 effective?

Good ●

The service was effective.

Details are in our Effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our Caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our Responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-Led findings below.

# Croft House and Cottages

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

**Inspection team:** The inspection was carried out by an inspector and a registration inspector.

**Service and service type:** This service provides care and support to people living in two '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.

The service was also registered for accommodation and personal care to provide short-break care for up to three people.

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:** We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office providing care. We needed to be sure that they would be in.

**What we did:** We planned the inspection using information we had received about the service. We reviewed the Provider Information Return. This is key information providers are required to send us about their service, what they do well, and improvements they plan to make. We contacted the local authority and Healthwatch. This information helps support our inspections.

During the inspection, we spent time with people who used the service. We asked five relatives and two care professionals for their views of the service. We spoke with the registered manager, deputy manager and two support workers.

We looked at two people's care records, one person's medicines records, three staff recruitment files, training and supervision records, complaints and quality assurance records.

We asked the registered manager to send us further documents after the inspection. They were received and were considered as part of our inspection.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- Staff had training and information about safeguarding people and they knew how to report any concerns.
- The provider understood their responsibility to protect the people who used the service. There had been no safeguarding concerns since the service began operating.
- Relatives described the service as "very safe".

Assessing risk, safety monitoring and management

- The service had risk assessments about people's general activities of living and their environments.
- There were also assessments about potential risks relating to people's behavioural needs, for example how they might react when out in the community. These did not always include clear records of the measures staff should use to control those risks. The registered manager stated the assessments would be reviewed to include detailed guidance for managing those risks.
- The provider used a specialist consultant to carry out health and safety checks of the accommodation.

Staffing and recruitment

- There were enough staff to support each person with their personal and social care needs. This included three support staff during the day and two support staff overnight.
- The provider used safe recruitment processes to make sure staff were suitable to work with people.
- The provider had contingency arrangements in place in case of mass staff absence.

Using medicines safely; Learning lessons when things go wrong

- Staff managed the prescribed medicine of one person and supported other people to use over the counter medicines and creams when required.
- The medicines administration records (MARs) did not include the number of medicines received or carried forward. There were no medication information sheets about the effects and side effects of medicines. During the inspection the registered manager revised the medicines records to include this information and arranged weekly audits to be carried out.
- The provider had learnt from a medicine recording error and made changes to reduce the risk of this reoccurring.

Preventing and controlling infection

- People were supported to keep their homes clean.
- Staff had training in infection control and personal hygiene. They had access to gloves and aprons.

# 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

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 came to use the service to make sure the right support could be provided.
- The service had assisted people with their individual transitional arrangement. Staff had helped people to move to their respective houses in the way that best suited their needs.
- The service applied the principles and values of Registering the Right support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

Staff support: induction, training, skills and experience

- Staff received training that was relevant to their role.
- All staff undertook essential health and safety training. Most staff were experienced support workers and had qualifications in care. Staff without care qualification were funded by the provider to achieve these.
- Staff said they were very well supported by the management team. They received supervision and felt their career progressions was promoted by the provider.

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

- None of the people using the supported living service had any nutritional needs. Some people could make their own meals and snacks with assistance from staff. Other people needed supervision at mealtimes to ensure they did not eat too quickly.
- People contributed to meal planning and shopping. One person described how they had joined a slimming club and was supported by staff to follow their diet.

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

- People were supported with their healthcare needs and to attend appointments when necessary.
- The service worked closely with social and health care agencies to promote people's well-being.
- The registered manager described excellent relationships with local and specialist health practitioners which helped to make sure people received the right support with their health.

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

- The accommodation in the short-break service and supported living houses was designed for young people who were physical fit and mobile.
- The style and decoration of the premises was modern and in keeping with the needs of the people who



would stay there.

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.

We checked whether the service was working within the principles of the MCA.

- People's consent was sought when staff were supporting them.
- The service involved people, relatives and relevant care professionals in any decisions made in people's best interests.
- Some records relating to people's capacity were not clear. The registered manager said they would review and clarify records relating to capacity and decision-making.

# 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

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

- There were very warm, engaging relationships between staff and people. Relatives were extremely positive about the care and kindness of the staff. Their comments included, "There is much love and laughter here" and "It's just a lovely, caring place."
- People said they liked the staff and were relaxed in their company. Relatives said, "It's just so wonderful seeing my [family members] so happy" and "Staff are very friendly and very supportive."
- Staff supported other agencies to understand needs of people with learning disabilities and autism. This helped to promote people's right to live ordinary lives in their own community.

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

- People were encouraged to be involved in making their own choices on a daily basis.
- People were included in all conversations about their support. They were given information in a way they could understand. Staff stated people's communication skills had "come on leaps and bounds" since using the service.
- People's individual methods of communicating were generally referenced in support plans. There were no specific communication passports that could be used to help new staff and other services understand how people expressed their feelings of pain, happiness or anxiety. During the inspection the registered manager put these in place.

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect and dignity.
- Some people were working towards their own goals of independent living. This included making their own meals.
- Relatives, care professionals and staff commented positively on the significant impact the service had on people's lives. Their comments included, "People have come on massively, they are much more independent", "Living there has had a very positive impact on their self-esteem and confidence" and "My [family member] is so happy and has thrived and blossomed here."

# Is the service responsive?

## Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People were supported to enjoy exceptionally fulfilled lives. They each received personalised care that was tailored to their individual needs and preferences.
- Staff knew people very well and what was important to them. Relatives described the positive impact of the service on people as a "life-changing experience".
- People were highly involved in their own 'records of achievement' which were in pictures. The registered manager stated support plans were to be reviewed to include more detailed information for staff and easy-read information for people.
- The service was successful in promoting people's social inclusion in their local community. People took part in work placements, activities and social events in the community. They were also supported to go on holidays.

Improving care quality in response to complaints or concerns

- People had been given their own, personalised copy of the complaints procedure which they kept in their bedrooms. These included photos of the two staff members they had chosen to tell if they were unhappy. Different people had chosen different staff.
- The service also had a formal complaint procedure which had been shared with relatives. No one had made a complaint.
- Relatives and staff had confidence in the registered manager and said they would be comfortable about raising any issues if necessary. Their comments included, "Anything I've raised has been dealt with effectively and in a professional way."

End of life care and support

- The people who used the service were young and physically fit. It would be the decision of health services about how they were supported at the end stages of their lives.

# 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

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

- This was a new service that was still developing. Some records were not yet sufficiently clear or detailed to support good governance. These included medicines records and risk management plans.
- The provider and registered manager demonstrated they were committed to continuing improvements at this new service. During the inspection, they began to address areas where recording could be improved.

We recommend the service continues to review records to ensure these provide clear, consistent guidance and meet best practice guidance.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The service was developed with input from people and their families to deliver personalised support for people in this rural community.
- People had a very good relationship with the registered manager. Relatives and care professionals praised the management style and the positive impact the service had on people's well-being.
- Staff said the registered manager was "approachable and supportive" and doing an "amazing job".

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

- Relatives had recently completed a complaints and compliments questionnaire. The responses were all very complimentary. Relatives said there was very good communication between the service and families. They said they felt able to contact the registered manager at any time.
- Staff said the service was successfully improving people's lives and they were proud to be part of it.
- Staff said they were supported and felt valued. They were encouraged to raise comments at team and individual meetings.

Working in partnership with others

- The registered manager and staff worked very effectively with other groups and agencies to continuously improve the support people received in the community.
- The service had good links with local community groups.

