

Pro Support Ltd

# Pro Support

## 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:

Pro Support is a care and support provider for people with mental health problems, learning disabilities and those with a dual diagnosis. The company is registered with the Care Quality Commission (CQC) as a domiciliary care agency as it provides support to people living in their own homes and also in supported accommodation.

People's experience of using this service:

People told us they felt safe using the service and staff displayed good knowledge about how to protect people from the risk of harm. People told us they received their medicines as prescribed and staff were recruited safely, with appropriate checks carried out before their employment commenced.

There were enough staff to care for people safely, with staff and people using the service telling us current staffing arrangements were sufficient. Accidents and incidents were monitored and any actions taken to prevent future re-occurrence were recorded.

People received the support they needed to eat and drink. People said they felt treated with dignity and respect and staff promoted their independence as required.

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.

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.

Complaints were handled appropriately, although none had been received since our last inspection. A number of compliments were also made about the service. People were able to access the community independently and spend their time how they wished. Activities and social gatherings were also held at some of the supported houses.

Audits and quality assurance systems were in place to monitor the quality of service. We received positive feedback from everybody we spoke with about management and leadership within the service.

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 last inspection was in March 2017 (published April 2017) and the overall rating was Good.

Why we inspected:

This was a routine comprehensive inspection and in line with our timescales for Good rated services which is approximately 30 months from the publication date of the last report.

Follow up:

We will continue to monitor information and intelligence we receive about the service to ensure good quality care is provided to people. We will return to re-inspect in line with our inspection timescales for Good rated services, however if any information of concern 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.

# Pro Support

## 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 one inspector.

#### Service and service type:

Pro Support is a 'domiciliary care service' It provides personal care to people living in their own homes and flats. Some people who use the service live independently in the community and other live in supported houses where staff are available 24 hours a day. 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 care and support.

The service had a manager registered with the CQC. 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 carried out this inspection on 1 and 4 November 2019. At the time of the inspection there were 12 people using the service.

The inspection was announced on 30 October 2019 to ensure the inspection could be facilitated by the registered manager at the location office. We also informed the registered manager we would be returning for a second day to complete the inspection and announced this in advance.

#### What we did:

Prior to the inspection we reviewed information and evidence we already held about this service, which had been collected via our ongoing monitoring of care services. This included notifications sent to us by the

service. Notifications are changes, events or incidents that the provider is legally obliged to send to us without delay.

We also viewed the provider information return (PIR). 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 contacted various local authorities for feedback about the service in advance of our inspection.

The first of day of the inspection was spent at the main office reviewing records such as support plans, staff files, supervision/appraisal records, complaints and quality assurance documentation. On the second day, we visited two of the supported houses to speak with staff and people about their experiences of both working for and receiving services from Pro Support.

During the inspection we spoke with the registered manager, nominated individual, service manager, two support workers and three people who used the service. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

Documentation reviewed included three support plans, three staff personnel files, three medicine administration records (MAR) and other records about the management of the service to help inform our inspection judgements.

# Is the service safe?

## Our findings

Safe – this means 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.

Staffing, recruitment and using medicines safely:

- There were enough staff to care for and support people safely. At the supported houses, staff were onsite 24 hours a day and the feedback we received from both staff and people using the service was that this was sufficient.
- One member of staff said, "There are enough staff at each of the projects. Most of the people are very independent and can do things for themselves." A person using the service added, "There are enough staff and there is always someone here."
- Staff were recruited safely and we found all relevant checks had been carried out prior to them commencing their employment.
- People told us they received their medicines safely. We looked at three MAR which were all completed accurately with no missing signatures. Daily stocks checks were completed and PRN (when required) plans were in place as required.
- Some people using the service received their medication via a depot injection which is slowly released into the body over a number of weeks. People told us staff provided support to attend these appointments in the community as necessary.
- Staff had received medication training and had their competency assessed by management to ensure medicines were given safely.

Assessing risk, safety monitoring and management; preventing and controlling infection;

- Each person using the service had risk assessments in place covering areas such as violence and aggression, self harm, suicide, substance misuse, absconding and fire safety. Where any risks were identified, there were detailed management plans in place about what staff needed to do to help keep people safe.
- Personal emergency evacuation plans (PEEP) were completed for each person and provided an overview of how they would evacuate in an emergency situation.
- People were protected from the risks of the spread of infection. Each of the houses we visited were clean and tidy. People were encouraged to help with cleaning tasks to develop their living skills when they moved into their own accommodation.

Systems and processes to safeguard people from the risk of abuse:

- People receiving this service and their relatives told us they felt the service was safe. One person said, "The support I received makes me feel safe." Another person added, "The service definitely gives me a feeling of safety and security."
- Staff confirmed they had received training in safeguarding and were able to describe the different types of

abuse that could occur and how to report concerns.

- A log of safeguarding incidents was maintained, along with any alerts that had been made to the local authority.
- A safeguarding policy and procedure was in place and provided information about how to escalate concerns. This information was also detailed in the service user handbook, which provided an overview about how concerns would be dealt with.

Learning lessons when things go wrong:

- Systems were in place for when things went wrong. Accidents and incidents were monitored closely, with details recorded about actions taken to prevent re-occurrences.

# 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 Requires Improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

The reason for the service being rated as Requires Improvement at the last inspection was because there was not always sufficient information about people's community treatment orders (CTO) within their support plan. We found the service had now resolved this issue and that it was now no longer an area of concern.

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.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the deprivation of liberty safeguards (DoLS) cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

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

- Staff had an understanding about the MCA legislation and had completed training in this area.
- At the time of the inspection, everybody had capacity and was able to make their own choices and decisions. The registered manager told us this would be kept under review if people's circumstances changed.

Staff support: induction, training, skills and experience:

- An induction programme was provided when staff first commenced employment to ensure they had a thorough understanding of what was required within their role.
- A training matrix was used which showed the different courses staff had completed. These were up to date and had been renewed during 2019.
- Staff spoke positively of the training provided and said enough was available to support them in their roles.

- Staff supervisions and appraisals were carried out and gave staff the opportunity to discuss their work and receive feedback about their performance.

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

- The care and support people needed to receive from staff had been captured as part of the initial assessment process and was recorded within support plans.
- When a package of care commenced, staff carried out an assessment of each person to ensure they were able to meet their needs.
- People told us they were involved in this process and were able to contribute towards the support they received and express their views.

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

- People were encouraged to be as independent as possible when preparing food and drink. At the time of the inspection, nobody required the use of any modified diets, or had been assessed as being nutritionally compromised.
- Most people were able to do their own shopping and prepare their own meals, although staff were available to support as required. One person told us how they had been supported to do some online shopping, to look at the prices of the foods in advance and make sure they had enough money.

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

- Appropriate referrals were made to other healthcare professionals as required.
- People who used the service told us staff had assisted them to healthcare appointments, if they were unable to attend on their own.
- Hospital passports were completed for each person and provided an overview of people's health needs if they ever needed to go into hospital.

# 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:

- People who used the service spoke positively about the standard of care provided and said staff treated them well. Staff were described as being kind, caring and considerate. One person said, "It is fantastic to be honest. I came from hospital and it was all very overwhelming for me." Another person added, "It's great and I have a solid relationship with all of the staff."
- We observed staff appeared very kind and caring in their approach towards people who used the service and knew them well. Staff were seen sitting and chatting with people in the communal areas, sharing a laugh and a joke. One person said, "The staff have helped me build my confidence again." Another person said, "The staff are always there when I need them."

Respecting and promoting people's privacy, dignity, independence and equality and diversity:

- People who used the service told us staff always treated them well and they were never made to feel uncomfortable or embarrassed. Full assistance with personal care was not always required, although people said staff were available to support them as required.
- One of the main aims of the service was to promote people's independence in order for them to live within the local community without staff support. People told us they carried out tasks such as cooking, cleaning, shopping, laundry and budgeting so they could develop the necessary life skills to be able to do this on their own.
- People's equality, diversity and human rights needs were fully taken into account and detailed in their care plan. This included their daily routines and things staff needed to be aware of.

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

- People who used the service said they felt involved in the support they received and were able to contribute where necessary. People told us 'House meetings' often took place and this enabled them to share their views and contribute towards decisions being made.
- Questionnaires were sent, seeking people's views and opinions about the service they received. These were also sent to families and health care professionals involved with the service.

# 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 meet people's needs, preferences, interests and give them choice and control:

- Each person who used the service had their own support plan in place. These provided information for staff about the care and support people needed.
- During the inspection, we spent time speaking with people and asked if they felt their support plans were followed by staff. People said staff supported them as required and in line with their assessed needs.
- Staff were aware of people's choices and preferences. Where care plans made reference to things people liked to do during the day, these were respected by staff to ensure people's support was person centred.

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.

- Support plans contained information about people's communication needs.
- The registered manager confirmed they could provide documents in different formats if required such as large print. Interpreter services had also been used in the past where English was not people's chosen language.

Improving care quality in response to complaints or concerns

- A central log of complaints was maintained, along with details about how each one had been responded to. However no complaints had been made since our last inspection.
- People knew how to provide feedback about the care they received and information about how to make a complaint was available in the service user handbook. A complaints policy and procedure was also available.

Supporting people to follow interests, maintain relationships and take part in activities to avoid social isolation:

- People were able to access the community independently to pursue hobbies, pastimes and activities of their choice. Staff told us this was something that was very much encouraged.
- Trips and outings were facilitated, particularly in the summer months. This included visits to the lake district and Blackpool. Barbeques were also held at some of the supported houses, which people were welcome to attend. Pool competitions were held amongst the different supported houses which we were told people were competitive about.
- Some people who used the service were supported to seek employment if this was something they wanted to do, with several people currently holding jobs in the local community. Others had accessed local colleges

to study learning courses of their choosing.

- People were encouraged to maintain relationships where possible, with people's relatives involved in the care and support people received as necessary.

#### End of life care and support

- Due to Pro Support being a domiciliary care service, end of life care and support was not provided directly. However the registered manager told us staff would work closely alongside other relevant healthcare professionals as necessary to provide the care and support people required.
- Nobody was in receipt of end of life care at the time of the inspection.

# 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 best practice in person-centred care. There was a clear culture based on achieving positive outcomes for people. Care plan documentation was person-centred and empowered people to be as independent as possible.
- People told us the staff knew them well and responded to their needs in a person-centred way.
- All the staff we spoke with told us they liked working for the service and that staff worked well together. We also received positive feedback about the management team at Pro Support. One member of staff said, "The managers are very approachable and I feel supported in my job." Another member of staff said, "Management is good. Everybody has defined roles and works well together."

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

- Monthly audits were completed at each of the supported houses and focused on areas such as feedback from people who used the service, the environment, staff, documentation and health and safety. Additional audits were also done of support plans and medication.
- Confidential information was stored securely and we saw documents such as care plans and staff recruitment files were stored in the main office which was always locked.
- Events which the provider is legally required to report to us were submitted as required when any incidents had occurred within the service.
- The ratings from our last inspection were clearly displayed on the provider website and also at the main office. This meant members of the public could see the level of care and support being provided.

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

- Staff meetings took place in the service which gave an opportunity to discuss work and improve the service people received. Staff said these took place regularly and minutes were available after the meeting, detailing what had been discussed.
- Pro Support had an active website and this provided a detailed overview of the support that could be provided to members of the public and people who may want to use the service.
- A range of policies were available and ensured people who used the service and staff had access to important information about procedures within the service.

#### Working in partnership with others

- The service had developed a number of links within the local community and worked in partnership with a range of different organisations to improve the support people required. This included mental health teams, local hospitals, drug and alcohol services and advocacy services.