

Prudent Supported Living Limited

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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?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

Prudent Supported Living Limited is a supported living service providing personal care to people as part of the support they need to live in their own homes. The service supports children aged 13-18, younger adults, older people, people with a mental health diagnosis, people with a learning disability and autistic people.

Not everyone who uses the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we consider any wider social care provided. At this inspection there were 2 people who received personal care.

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

Right Support:

Staff knew people well and focused on people's strengths and promoted what they could do. People had a fulfilling and meaningful everyday life because staff promoted independence wherever possible.

The service worked with people to plan for when they experienced periods of distress so that their freedoms were restricted only if there was no alternative.

Staff supported people to make decisions following best practice in decision-making. People were supported to have maximum choice and control of their lives and staff them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Right Care:

People received exceptionally kind and compassionate care. Staff promoted equality and diversity in their support for people. People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs.

People's care, treatment and support plans reflected their range of needs and this promoted their wellbeing and enjoyment of life.

Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it.

Staff and people cooperated to assess risks people might face. Where appropriate, staff encouraged and

enabled people to take positive risks.

Right Culture:

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. Staff ensured risks of a closed culture were minimised. People's quality of life was enhanced by the service's culture of transparency, respect, improvement and inclusivity.

Staff placed people's wishes, needs and rights at the heart of everything they did.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 18 May 2022 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

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 ●

Prudent Supported Living Limited

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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by 1 inspector.

Service and service type

This service provides care and support to people living in '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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small, and we needed to ensure the provider would be available to support the inspection.

What we did before inspection

We reviewed information we had received about the service since registration. We sought feedback from the local authority and professionals who work with the service. We used this information to plan our inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We obtained feedback from 2 people who used the service. Not everyone using the service was able to speak with us, so staff supported them to feedback using their preferred communication methods. We spoke with 2 professionals who work with the service. We spoke with 7 members of staff, including the registered manager, junior psychologist and operations manager, training manager and support workers. We reviewed 2 people's care and support records. We looked at 2 staff files in relation to recruitment. A variety of records relating to the management of the service were reviewed including policies and procedures.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from the risk of abuse. People told us they felt safe using the service because staff knew them well. Staff had training on how to recognise and report abuse and they knew how to apply it.
- The culture within the service meant people and staff were actively encouraged and empowered to raise concerns. For example, whistleblowing procedures were regularly discussed within staff team meetings. Staff understood their responsibilities to challenge unsafe practice, one staff told us, "We have to blow the whistle if things aren't right."
- The service worked well with other agencies to protect people. Information was appropriately shared, and investigations were robust and used to improve safety to people.

Assessing risk, safety monitoring and management

- Risks to people were identified and assessed. There was clear guidance in place for staff to refer to when supporting people which was regularly reviewed and updated as people's needs changed.
- People were involved in managing risks to themselves and in taking decisions about how to keep safe.
- The provider assessed people's sensory needs and did their best to meet them. Specialist trained staff completed functional assessments for people who needed them and took the time to understand people's behaviours.
- People were restrained only where evidence demonstrated it was absolutely necessary to keep them safe. Where restraint was used, it was lawfully justified and only used for the minimum period of time. People and staff had access to independent therapeutic support from a psychotherapist following restrictive practice.
- The provider supported people to maintain a safe environment at home. For example, by checking and replacing smoke alarm batteries and liaising with the housing provider in relation to repairs on the property.

Staffing and recruitment

- The service had enough staff. This included commissioned staffing ratios to support people to keep safe, meet their emotional needs and to take part in activities and visits how and when they wanted.
- Managers considered the culture within the service when planning shift patterns, for example by ensuring staff regularly worked with different staff. Where concerns about performance were identified, the registered manager dealt with this immediately and ensured staff were supported to improve.
- There was a robust recruitment system in place. This made sure the right staff were recruited to support people to stay safe. Speaking about recruitment, one staff told us, "I think [Prudent Supported Living Limited] want the right staff working for them, not just any staff."

Using medicines safely

- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely.
- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles.

Preventing and controlling infection

- People's care and support records provided guidance on how they can be supported to protect themselves from the risk of infection.
- The service's infection prevention and control policy was up to date and referred to current and best practice guidance. Staff had received training in infection prevention and control.

Learning lessons when things go wrong

- People received safe care because lessons were learned when things went wrong. The service managed incidents affecting people's safety well.
- Staff recognised incidents and reported them appropriately and managers investigated incidents and shared lessons learned. One staff told us, "We have an in-depth accident and incident report, we do debriefs and will call on-call as they tend to happen at night. The manager will talk to us in the morning and we can go into the office. We also have counselling support."
- Applied behaviour analysis (ABA) was utilised to understand people's behaviours, learn how to support them and subsequently mitigate risk. For example, ABA had helped to identify how a person's mood may indicate a change in behaviour which could place them at risk. This information was then shared with staff, so they were aware of signs to look out for and intervene early to prevent harm.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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; Staff working with other agencies to provide consistent, effective, timely care

- Assessments of needs were comprehensive and reflected people's diverse needs. Support plans were informed by these assessments, people's wishes and relevant legislation, such as an education, health and care plan (EHCP). An EHCP identifies educational, health and social needs and sets out the additional support to meet those needs.
- Support plans detailed strategies to enhance independence and demonstrated evidence of planning and consideration of the longer-term aspirations of each person.
- People were provided with joined-up support so they could travel, access health care, education and or employment opportunities and social events. For example, the provider had a good working relationship with a person's school.

Staff support: induction, training, skills and experience

- People were supported by staff who had received relevant and good quality training in evidence-based practice. This included training in the wide range of strengths and impairments people with a learning disability and or autistic people may have. The registered manager told us some of this training was delivered from the point of view of a person with a learning disability, or autism, to help staff put themselves in the shoes of the people they may support.
- Training was delivered by a highly skilled in-house team. This included a training manager, autism practitioner and junior psychologist. The provider was working towards becoming a continued professional development (CPD) accredited organisation, with the aim to deliver the best training they could.
- Staff had a comprehensive 7-day face to face induction when they started working with the service. Staff spoke very highly of the training and felt it provided them with the knowledge and skills to carry out their roles. One staff told us, "The training was so fun, it was pitched at a level that we understood it was fascinating."
- The provider checked staff competencies to ensure they understood and applied training and best practice. Staff received support in the form of continual supervision, appraisal and recognition of good practice.
- Feedback from a variety of health and social care professionals described staff's care and practice as excellent.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support

- People with complex needs received support to eat and drink in a way that met their personal preferences

as far as possible. Where specialist support was required to meet people's nutrition and hydration needs, the service worked with relevant healthcare professionals to ensure these needs were met.

- People had health actions plans in place and were referred to health care professionals to support their wellbeing and help them to live healthy lives.
- The provider sought to improve the care and treatment of people using the service. For example, they were supporting their in-house junior psychologist to undergo training to deliver Cognitive Behaviour Therapy (CBT) with the aim to minimise the waiting time for people using the service to access this intervention.

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 MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The provider worked within the principles of the MCA and people's human and legal rights were upheld.
- Restrictions that were imposed on people were kept under constant review to ensure they were in place only if absolutely necessary. People were referred for professional assessment at the earliest opportunity.
- Staff were confident about using the MCA. Where people did not have the capacity to make decisions, they were given the information they needed in an accessible format.

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.

This is the first inspection for this newly registered service. This key question has been rated outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- People were placed at the heart of the service. The culture was underpinned by their underlying principles of rights, independence, choice and inclusion. Staff demonstrated a commitment to these principles and providing compassionate and kind care. For example, one staff member told us, "I love what we are implementing for the young people we support, what they want to do for them coming out of care."
- Feedback from professionals working with the service about the care and support of people was consistently positive. For example, we reviewed feedback that said, "The staff understand the young person very well and staff have been able to develop trusting relationships with them, which has been key to the progress they have made in their care." Another said, "I have observed staff being nurturing and [staff] have a good understanding of the young people's needs ." This showed staff were focused on building relationships and maintaining trust with the people they supported.
- People felt like they mattered. One person said, "[Staff] are good to me." To support one person's emotional wellbeing, staff had created a booklet of happy memories over the last year. This booklet included quotes from staff thanking the person for things they had taught them. One quote said, "Never forget how special you are and always follow your dreams." This demonstrated staff positively contributed to people's health and recovery.
- Equality, diversity and a human rights approach to supporting people and staff was well embedded in the service. People's diverse needs were respected at all times. Considerations of how to ensure people were not discriminated against were clearly recorded within care plans and documentation, for example use of pronouns. This informed some of the training that staff undertook, to ensure staff were confident in supporting people with protected characteristics.
- The provider was sensitive to times when people needed caring and compassionate support. They asked people how staff could change their way of working to fully support them in these situations. For example, when one person was struggling with their mental health, they'd asked staff to be mindful of topics of conversation. Where people needed additional support to meet their emotional needs, this was implemented.

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

- Careful planning and thought went into ensuring the right staff team were supporting people. The provider considered people's equality and diversity characteristics and matched staff with people's preferences. One person was actively involved in the recruitment of new staff and had a say in who was recruited. They had opportunities to ask any questions they liked to potential recruits. The person told us they really valued this experience and it made them feel empowered.

- People, and relatives, where appropriate, were central to decisions around their care and support. One person told us, "I've got a choice in what I can do at home." Staff understood the importance of holistic care. We reviewed feedback from one professional which stated, "[Prudent] have been creative in thinking of alternative solutions for the young person and work closely with them to allow them to feel that their voice is being heard."
- Prudent Supported Living Limited were extremely passionate about making sure that people got the support they needed and wanted. Staff demonstrated a deep understanding of how to advocate on people's behalf and empower them to be in control of their care, life and home. This included supporting people in challenging discrimination, or poor practice outside of the service. One person told us "I like how staff fight my corner."

Respecting and promoting people's privacy, dignity and independence

- People's independence had grown since being supported by Prudent Supported Living Limited and people were supported to be independent wherever possible. For example, using communication tools to choose their meals. One person using the service was being supported to access different local shops. Staff had worked to break this down into manageable steps to improve their independence.
- The provider took all reasonable steps to promote people's independence and dignity wherever possible. People were involved in creating their care plans which clearly detailed when they wanted to be independent and when they needed additional support.
- The provider had a comprehensive understanding of people and their support needs to ensure a smooth transition from services for young people. To aid in the transition, the provider developed an in-depth transition plan with the young person, their family and other key stakeholders. These plans spanned over weeks and clearly identified what needed to be completed on each day to support a positive move, such as completing assessments, visiting previous providers and gradual introductions to staff teams.
- The provider found creative ways to meet people's needs and took into account individual preferences and challenges. For example, on one day of the transition period staff visited the person in a staggered pattern over a weekend to minimise the number of new faces they had to meet in short space of time. Records showed the person had been involved in the process and adjustments had been made to increase their confidence.
- Staff were skilled in anticipating people's needs and recognising when people may be in distress. Care plans clearly detailed things that could lead to people becoming distressed, and how staff could help to manage this. One member of staff had identified a potential cause of distress was the service not always having access to all ingredients within one person's cookbook. They suggested creating their own with ingredients that were always readily available.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. 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; 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

- The provider supported people through recognised models of care and treatment for people with a learning disability or autistic people. Their statement of purpose highlighted that by adopting the social model of disability, they would support people to overcome all barriers they may encounter in order to achieve independence, equality of access to services and activities within the local community enhancing their lifelong prospects.
- Care plans reflected the principles of right support, right care and right culture. They were person centred and included relevant assessments of people's communication support and sensory needs.
- The provider used the skills of their autism practitioner and junior psychologist, to plan personalised care to meet people's sensory needs. For example, plans to support one person in growing a herb garden with strong smelling herbs and plants.
- People were encouraged and motivated by staff to reach their goals and aspirations. Another person's goal was to "ensure my voice is heard." They had made significant progress in achieving this goal by improving their communication.
- People were supported to maintain and develop social relationships as they wanted. People were supported to follow their interests, for example going to theme parks or concerts. One person told us, "I like to do art and staff support that."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider followed the Accessible Information Standard. For example, information was given to people in formats they could understand, such as easy read.
- People had high quality communication care plans in place. These provided guidance for staff on how a person communicates, how to modify their own communication to support them and factors which could impact on a person's ability to communicate, such as feeling unwell.
- Staff were trained in and used different communication methods with people. This included Makaton and picture exchange card system (PECS). Visual aids were used to support people to understand their daily routines.

- The provider explored ways in which they could support people to improve their communication. As a direct result of the support from the service, one person had been supported to expand their vocabulary and use communication aids to express their emotion.

Improving care quality in response to complaints or concerns

- The provider had robust systems and policies in place to reflect on complaints and concerns. Complaints were responded to in a professional and timely manner.
- People using the service told us they felt able to raise concerns with staff and these would be dealt with appropriately.

End of life care and support

- At the time of our inspection, no one using the service was considered to be at the end of their lives. The provider was able to demonstrate an understanding of having these discussions with people at an appropriate time.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- There was a clear vision and strategy which promoted person-centred and high-quality care. This was understood and delivered by a team of dedicated staff. One staff member told us, "What Prudent do best is empower, we build trust and we empower the people we support. We want to improve their lives."
- The registered manager demonstrated a commitment to creating a positive and inclusive culture. For example, a neurodiversity lead with the relevant expertise was available to support and promote the wellbeing of people and staff.
- We received consistent positive feedback the service was well-led. One person told us, "[Registered manager] is great." A staff member said, "[Registered manager] is brilliant, a character, but a passionate one. I believe everything they say they will do they will carry out, it inspires me." A professional shared, "They have good standards, are organised and have good communication."
- Managers and staff worked together to ensure the best possible outcomes for each person being supported, such as accessing services, education and increasing independence. We reviewed feedback from one professional which highlighted one person's "significant progress since being in Prudent's care."

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

- The provider understood and demonstrated the requirements of the duty of candour to be open, honest and transparent when things have gone wrong.
- Staff told us the registered manager was open and honest. One staff told us, "[Registered manager] admits they are human, and I think this empowers staff as it encourages learning from mistakes."

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

- The provider had a well-developed quality assurance framework and used this for achieving compliance and identifying areas to help improve the service. The provider kept up to date with national policy to inform improvements to the service.
- There were clear lines of accountability established within the service and both managers and staff understood their roles and responsibilities for people's care. This included related record keeping, information handling, communication and reporting.
- The provider was committed to continuous learning. The provider had high ambitions for the service and implemented a clear action plan to support in achieving them. Staff were also encouraged to develop.

- Health and social care professionals spoke highly of the provider's willingness to learn. One professional working with the service told us, "They are knowledgeable and always looking at ways to improve their service" and "Prudent are always open to new suggestions."

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

- People were placed at the forefront of the service and their views and people involved in their care regularly sought, such as through meetings or quality surveys. As the service was small, the registered manager also had very regular contact with people. People told us they could raise issues with the registered manager any time and felt they would be listened to.
- Staff felt involved with the service. There were opportunities to feedback through regular team meetings, surveys and supervision. Staff felt able to make suggestions to improve ways of working and these ideas were implemented.
- Staff consistently fed back they felt supported in their roles. One member of staff said, "[Registered manager's] door is always open", one told us "The best thing about prudent is that they give a lot of support." Another said, "I do feel like a valued member of the team."

Working in partnership with others

- The provider had positive working relationships with a range of housing, health and social care professionals and worked effectively to coordinate better care for people.
- Managers attended regular multi-disciplinary team meetings to understand and share information about people's needs. One professional told us, "My experience (with Prudent) has been very positive and information I believe has always been shared in an appropriate timescale."
- Timely referrals were made to relevant professionals and staff followed recommendations. One professional told us, "Staff are always quick to report anything." Another said, "I always receive regular updates if actions have been identified."