

Creative Support Limited

Creative Support - Hampton Crescent

Inspection report

Richmond Hill
Long Close Lane
Leeds
West Yorkshire
LS9 8NH

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23 October 2018

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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

Creative Support Hampton Crescent is an extra care housing scheme for people aged 55 years and over. Creative support provide on site emergency response and planned domiciliary care to people within their own homes in the scheme. At the time of this inspection 27 people used the service.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

People told us they felt safe and well supported by the support workers from the service. The provider followed robust recruitment checks, to employ suitable support workers, and there continued to be sufficient support workers employed to ensure domiciliary care visits were carried out in a timely way. People's medicines were managed safely.

Support workers continued to receive appropriate training to give them the knowledge and skills they required to carry out their roles. This included training on the administration of medicines and on how to protect people from the risk of harm. Support workers received regular supervision to fulfil their roles effectively and had yearly appraisals to monitor their work performance.

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

Where support workers prepared and cooked meals for people, people told us they enjoyed their meals.

Support workers knew about people's individual care needs and care plans were person-centred and detailed. People gave us positive feedback about the support workers and described them as "Excellent, caring and knowledgeable." We were told the support workers treated people who used the service with compassion, dignity and respect.

People told us that the service was well managed and organised. The registered manager and deputy manager assessed and monitored the quality of care provided to people. People and support workers were asked for their views and their suggestions were used to continuously improve the service.

Further information is in the detailed findings below

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service remains good.

Good ●

Is the service effective?

The service remains good.

Good ●

Is the service caring?

The service remains good.

Good ●

Is the service responsive?

The service remains good.

Good ●

Is the service well-led?

The service remains good.

Good ●

Creative Support - Hampton Crescent

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This comprehensive inspection took place on 23 October 2018 and it was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be in the office.

The inspection was carried out by one inspector.

Before the inspection we reviewed information available to us about this service. The provider had completed a Provider Information Return (PIR). The PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed safeguarding alerts; share your experience forms and notifications that had been sent to us. A notification is information about important events which the provider is required to send us by law.

At this inspection we spoke with the registered manager, deputy manager and four support workers. We held a meeting with nine people who used the service who said they would be happy to meet and speak with us.

We looked at two people's care records, including their initial assessments, care plans and risk assessments. We looked at medication administration records (MARs) where support workers were responsible for administering medicines. We also looked at a selection of documentation about the management and running of the service. This included quality assurance information, audits, recruitment information for two members of staff, staff training records, policies and procedures, complaints and staff rotas.

Is the service safe?

Our findings

At the last inspection we found the service was safe and awarded a rating of good. At this inspection we found the service remained good.

People who used the service said they felt safe, confident and happy when being supported by support workers. They said, "Support workers are lovely, kind and caring." One person told us, "Without the support workers I would not have the means to be independent. They help me get up in the morning so I can then get on with my day."

Policies in relation to safeguarding and whistleblowing reflected local procedures and relevant contact information. Support workers demonstrated a good awareness of safeguarding procedures and knew who to inform if they witnessed or had an allegation of abuse reported to them. The registered manager and deputy manager were aware of their responsibility to liaise with the local authority if safeguarding concerns were raised and previous incidents had been managed well.

Systems were in place to identify and reduce the risks to people who used the service. People's care plans included detailed and informative risk assessments. These documents were individualised and provided staff with a clear description of any risks and guidance on the support people needed to manage these. Staff understood the support people needed to promote their independence and freedom, yet minimise the risks.

There were systems in place for monitoring, recording and reporting accidents and incidents. People told us, "We have pendants and bracelets for calling for assistance if we need it" and "There is someone on duty overnight so if there is an emergency they can get you the help you need."

People told us and we could see for ourselves that there was enough staff available to meet people's needs and to keep them safe. During our meeting people told us, "Support workers turn up on time and stay the right length of time", "Nothing is too much trouble and they always ask how you are if they see you outside of the call. For example when we are in the restaurant" and, "I don't always know who is on duty until they turn up, but I know all the staff and I am okay with them all."

A robust recruitment and selection process was in place and staff had been subject to criminal record checks before starting work at the service. These checks are carried out by the Disclosure and Barring Service (DBS) and helps employers to make safer recruitment decisions and prevent unsuitable staff being employed.

We looked at how medicines were managed within the service and checked people's medication administration records (MARs). We saw that medicines were stored safely, obtained in a timely way so that people did not run out of them, administered on time, recorded correctly and disposed of appropriately. The care staff informed us that they had received training on the handling of medicines. This was confirmed by our checks of the staff training files. The registered manager had completed medicine competency checks for all the staff who administered medicines to people.

Is the service effective?

Our findings

At the last inspection we found the service was effective and awarded a rating of good. At this inspection we found the service remained good.

Anchor Trust is the housing provider and owns the building. Creative support is the care provider; they rent an office and staff room from Anchor and provide a domiciliary care service to the forty flats within the building. People had access to a large communal lounge and restaurant facility. People were extremely positive about the support and care they received. One person told us, "All the support workers are well trained and know what they are doing. I have complete confidence in them."

There was a comprehensive induction and training programme in place for support workers. Support workers told us, "New support workers do a lot of 'shadowing' of more experienced support workers and we do face-to-face and on-line training." Support workers were supported by having regular supervision and annual appraisals. Supervision is a process, usually a meeting, by which an organisation provides guidance and support to its staff.

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. Where people lack mental capacity to make 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 live in their own homes, applications to deprive a person of their liberty must be authorised by the Court of Protection.

We checked whether the service was working within the principles of the MCA. We found that training was provided for staff on the MCA. Support workers we spoke with showed they understood the importance of consent and we saw that capacity issues were explored when planning people's packages of care and support. People who used the service were asked to sign their care records to document that they consented to the care and support provided. Everyone who used the service had capacity to make their own decisions about their care and support.

People told us they received good healthcare. Two people who spoke with us had needed an ambulance recently and said support workers stayed with them until the emergency services arrived. Some people had support workers go with them to medical appointments but one person said they managed on their own. People told us, "Support workers are good at calling out the GP or district nurse if needed" and "Support workers are really good at looking after us."

There was a strong emphasis on the importance of people eating and drinking well. The majority of people who spoke with us said they used the on-site restaurant facility and they met up daily at lunch time for their meal. All said they made their own choices about daily living and were able to be as independent as possible. Families came to see them and could have a drink or meal in the restaurant if needed. Where

required, support workers assisted people with shopping for food and supported people with making simple meals and snacks.

Is the service caring?

Our findings

At the last inspection we found the service was caring and awarded a rating of good. At this inspection we found the service remained good.

The service had a person-centred culture. Both support workers and management were fully committed to ensuring people received the best possible care in a loving and caring environment. The registered manager and support workers encouraged people to mix and make friends by organising activities for people. For example, every Wednesday there was a 'keep active coffee morning' from 10.30am to 11.30am, for people and their families. This was facilitated by the support workers who assisted people from their flats to attend. People told us, "I really enjoy living here" and "I have more contact with other people and I have made a lot of new friends since coming into this building. When I was at home I was isolated and lonely."

People were supported by a small team of support workers who covered each other for leave or sickness. This meant people received a continuity of care from support workers who they knew and trusted. We observed support workers and people together and saw there was a good working relationship and people were happy and relaxed in the company of support workers. Support workers we spoke with understood the importance of supporting people to be as independent as possible whilst respecting people's choices. Through our discussions they demonstrated to us that they had good knowledge and understanding of people's needs, wishes and choices around their care.

The provider had a policy and procedure for promoting equality and diversity within the service. Support workers had received training on this subject and understood how it related to their working role. They treated people on an equal basis and we saw that equality and diversity information such as gender, race, religion, nationality and sexual orientation were recorded in the care files. Support workers understood it is a person's human right to be treated with respect and dignity and to be able to express their views. We observed them putting this into practice during the inspection. People confirmed support workers were always very polite and included them when making decisions about how they wanted their care provided. One person told us, "I don't want male support workers giving me personal care and this choice is respected."

The registered manager understood the role of advocacy and had contact details available if anyone who used the service required the support of an advocate. An advocate is someone who supports people, particularly those who are most vulnerable in society, to ensure that their voice is heard on issues that are important to them.

People said they were treated with compassion, dignity and respect. People confirmed to us that support workers addressed them by their preferred name, gave them eye contact when conversing with them and were always polite and respectful when in their company.

Is the service responsive?

Our findings

At the last inspection we found the service was responsive and awarded a rating of good. At this inspection we found the service remained good.

An assessment was carried out prior to admission, to identify each person's support needs. Care plans were developed outlining how these needs were to be met. Involving people in this assessment helped to ensure support was planned to meet people's individual care preferences. Risk assessments had been completed and care plans were in place to make sure people stayed safe and well. We saw that care plans and risk assessments had been reviewed to make sure they contained relevant information and were up-to-date. We saw that each person had a record of all interactions of care and support.

People told us support workers were responsive to their needs and went out of their way to assist them with any problems or changes to care and support that they might require. The registered manager told us that they constantly monitored the input from the support workers and used feedback from reviews to reassess the current care packages.

There were good communication links between the different support workers and the management team. There were systems in place to share information between the different shifts. These included use of a 'medicine query' book and a handover sheet. Support workers told us they had a handover at the start of the morning shift from the night manager. They said, "Everything is documented in the communications book so if you need to ring a GP for example, it is down against the person's name. You know from the rota who you are looking after and when, and if you need to give medicines later on because of an unexpected issue, it is documented for you to follow." Support workers also spoke with us about recording in the care files and completing the daily record sheets, so that there was an up to date record of support given to people. Support workers told us, "We also discuss information at our monthly team meetings, which means everyone knows what is going on."

The management team and support workers had a good understanding of people's needs and found creative ways of supporting them to have a good quality of life. People told us they attended meetings when they occurred and enjoyed the social activities arranged for them by the service. Last year the registered manager organised a Christmas party for them which was thoroughly enjoyed and people told us they hoped this took place again this year. People said they liked the Wednesday coffee morning and told us they could go to the local community centre for other activities if they wished. Families were made welcome at the coffee morning or other activities. People were aware of the weekly activity planner and said the registered manager would let them know if anything was going on. For example, they particularly enjoyed the organised race day and pub nights this year.

The provider had thought about the provision of accessible information for people and families, as there were user friendly formats of information available. People had access to a copy of the provider's complaint policy and procedure in a format suitable for them to understand. No complaints had been received in the last two years. Two families had sent in cards in October 2018 thanking support workers for the care of their

relatives up to their end of life. One family wrote, "Thank you for the love, care, compassion and patience given to our relative during their time at Hampton Crescent. Your support staff were professional and caring."

Is the service well-led?

Our findings

At the last inspection we found the service was well-led and awarded a rating of good. At this inspection we found the service remained good.

There was a registered manager in post who was supported by a deputy manager. A 'registered manager' is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People who used the service said the culture of the service was open, transparent and the registered manager sought ideas and suggestions on how care and practice could be improved. People said, "I think the service is well managed" and "The registered manager is very approachable."

Support workers' morale was high and the atmosphere within the service was warm, happy and supportive. Our observation of the service was that it was well run and that people who used the service were treated with respect and in a professional manner. The registered manager had established links with other organisations and professionals to ensure people received a good service. This included working in partnership with health and social care professionals. Our observations and interviews with the support workers indicated that they were all motivated to support people to the best of their abilities, they were caring, patient and kind with people who used the service. Their discussions with us showed they had good insight into what people wanted from the service and how to achieve this. One person who used the service said, "I don't know what I would do without the service. It has been, and continues to be, an essential life-line for me."

The registered manager told us that feedback from people who used the service and support workers was obtained through care reviews, day-to-day business and monthly staff meetings. The registered manager told us they spoke face-to-face with people about any changes happening with the service and this was confirmed by the people we met and spoke with during the inspection. The comments we received as part of this inspection were 100% positive about the service and how it was managed. Support workers told us, "The manager is really supportive and we are not asked to do any tasks that we don't feel confident about completing. We can ask for more training or support during our supervisions."

Quality audits were undertaken to check that the systems in place at the service were being followed by support workers. The registered manager carried out monthly audits of the systems and practice to assess the quality of the service, which were then used to make improvements. We asked for a variety of records and documents during our inspection. We found these were well kept, easily accessible and stored securely. Services that provide health and social care to people are required to inform CQC of important events that happen in the service. The registered manager had informed CQC of significant events in a timely way. This meant we could check that appropriate action had been taken.