

Exceed Support Services Ltd

Blisworth Home

Inspection report

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31 December 2019

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

Exceed Support Services Ltd is registered with the Care Quality Commission (CQC) as a domiciliary care and supported living service which provides personal care and support to people living in the community.

At the time of inspection two people were receiving personal care and support in a four-bedroomed house for supported living. Exceed Support Services Ltd also provided the opportunity of a respite service at this location. Staff were available to support people 24 hours a day, which included sleep in arrangements overnight.

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

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

The staff recruitment procedures were not always robust. The service had carried out pre-employment checks, however did not always follow this up with appropriate actions to ensure risk was properly assessed.

People's care needs had been identified and risk assessed. Care plans were person-centred and considered people's preferences, likes, dislikes and interests.

People told us they felt happy with staff. Staff knew how to support people they cared for well.

Staff knew how to identify and report any signs of abuse or concerns appropriately.

People received their medicines safely by competently trained staff and staff knew how to protect people from the risk of infection.

The registered manager was approachable and understood the needs of people. Staff were able to express views, concerns and ideas and felt listened to.

People were supported by staff that maintained and respected their privacy and dignity.

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.

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.

People were able to access activities important to them to meet their social and cultural needs. Staff supported people to maintain relationships and communicated well with relatives.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 13 December 2017, however no one used the service until April 2019. This is the first inspection.

Why we inspected

This was a planned inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement 

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good 

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good 

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good 

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good 

Blisworth Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service is registered as a domiciliary care and supported living agency. It provides personal care to people living in one 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. The Care Quality Commission (CQC) does not regulate premises used for supported living; this inspection looked at people's personal 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 gave a short period of notice for the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 23 December 2019 and ended on 31 December 2019. We visited the office location on 23 December 2019 and made telephone calls to staff and relatives on 24 December 2019 and 31 December 2019.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, professionals who work with the service and Healthwatch. Healthwatch is an

independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and two relatives about their experience of the care provided. We spoke with two members of staff including the registered manager and a care worker.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked further at quality assurance records and recruitment processes.

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 for this registered service. This key question has been rated Requires Improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Staffing and recruitment

- Staff recruitment processes needed to be more robust to ensure they were carried out in line with their policy and provided assurance that staff were suitable to work in the service.
- References were requested from previous employers in the health and social care sector. However, processes in place did not clearly document or ensure the references received were appropriate or consistent with the requests made.
- The provider had not completed a risk assessment to assure themselves of the staff member's suitability to carry out their role where two employment references had not been given. We discussed this with the registered manager at the time of inspection and they informed us they would complete a risk assessment and followed up character reference requests.
- There were enough staff to support people to stay safe and meet their needs. The registered manager told us they were also allocated on the rota when required, and agency staff would be used to support if needed. Regular care staff had been recruited to provide more consistency for people using the service.

Assessing risk, safety monitoring and management

- Risk assessments in relation to people's identified needs were in place. This included examples such as falls, moving and handling, oral health and finances. As a small service, the registered manager was in the process of establishing a consistent approach to their care records to ensure all areas of need were documented effectively and clearly.
- People's care plans identified and mitigated most of their risks effectively and staff were able to tell us how they safely support people using the service. People known with epilepsy, did not have enough specific guidance in their care records for staff to access and follow to monitor and manage this risk. We discussed this with the registered manager who recognised the need to have such guidance in place and acted upon this immediately.
- Health and safety checks were carried out. We saw that hot water temperatures were being checked and recorded daily where people were being assisted to bath or shower.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt happy with staff.
- All staff had completed training in safeguarding people from abuse or avoidable harm. Staff knew how to identify and respond to signs of abuse. One staff member told us, "Safeguarding means protecting people from abuse...if I saw something I would report it to the manager or follow the whistle blowing policy."
- The provider had a safeguarding policy in place, which staff told us they had access to at any time. The

registered manager understood their responsibilities to keep people safe and was aware when to raise and report concerns appropriately.

Using medicines safely

- Medicines were administered safely by trained and competent staff. The registered manager carried out regular checks with staff to observe their competency and provide support where needed.
- The registered manager carried out Medication Administration Records (MAR) audits to check staff recorded and administered medicines in line with the provider's policy and best practice guidance.

Preventing and controlling infection

- Staff followed infection prevention and control procedures to protect people from infection. All staff had completed training in infection control and food hygiene.
- Staff told us there was enough personal protective equipment available to support people safely, such as aprons and gloves.

Learning lessons when things go wrong

- Lessons were learnt when things went wrong. The provider had systems in place for recording and reviewing any accidents and incidents. We saw evidence of actions taken to mitigate future risks.
- The registered manager sought to improve the service. For example, they explained how changes had been required in the documenting of daily notes. This included a new format which prompted staff to record all significant information and enabled the registered manager to track and identify any discrepancies more effectively, and act sooner if required.

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 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

- People's needs and choices had been fully assessed before receiving care from the service. Assessments included people's health, social, care and cultural needs. They also detailed people's medical history, daily routines and preferences.
- Care plans were reviewed, and daily notes reflected that care was being delivered in line with guidance and standards.

Staff support: induction, training, skills and experience

- Staff received an induction at the start of their employment and had training in line with the Care Certificate, which was effective from April 2015 as a benchmark for the skills people require to be effective care workers. Additional training, specific to meet the needs of people using the service, was also provided. This included Learning disability awareness, Autism awareness and Epilepsy awareness.
- Staff felt supported by the registered manager through regular contact and supervision. Staff had been encouraged and supported to access training and higher-level qualifications to develop their role. One staff told us, "[Registered manager] has introduced me to extra training."
- The registered manager reviewed training needs of staff within staff files to ensure this had been completed and was in date. The registered manager told us a more formalised system to record and identify staff training was planned to be implemented in line with the next refresher training.

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

- Staff received up to date training in nutrition and hydration and food hygiene.
- People were included in their meal choices. Care plans identified people's dietary requirement needs and we saw examples of staff respecting people's preferences, likes and dislikes and promoting their independence.

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

- Staff worked alongside other health professionals to deliver effective care for people using the service. Care records identified involvement from multiple disciplines, including speech and language therapists, social workers and community specialist nurses.
- Staff knew what to do if they found a person to appear unwell or needed urgent medical help. People were supported to attend medical appointments, and this would be communicated within their care files. The registered manager told us they would liaise with the GP as and when appropriate to review people's needs.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

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

- The registered manager understood their responsibilities to protect people's rights and what was required when a person did not have the capacity to make decisions on their own.
- People had mental capacity assessments in place, for example, in relation to their medicine and personal hygiene. This was documented within their care files and decisions were made in line with best interest processes.
- The registered manager ensured any decisions, where appropriate, had been discussed with the person, relevant professionals and family members involved in people's care. People also had contact with advocacy services to provide support with their care decisions.

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 registered service. This key question has been rated Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People were supported by a small team of staff that were kind, caring and treated people well. One person told us, "[Staff] is nice to me...[Staff] helps me get ready sometimes." One relative said, "We are more than happy with [person] being there, [person] is happy."
- The registered manager explained that staff were recruited with consideration of people's preferences, age, cultural needs, social needs and interests, alongside the skills and knowledge of the care staff. Part of the interview process included shadowed observation; this ensured staff treated people with respect and were able to build an effective relationship to support them.
- The provider promoted equality and diversity through their training, policies and within their staff handbook.

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

- People, relatives and advocates where appropriate, had opportunities to be included in their care plans and care delivery. One relative told us, "We were involved in the planning of care, as was [person]." We also saw people had signed to indicate they agreed with their care plans, where able.
- People were encouraged to express their views; this included the opportunity to provide feedback through surveys about the care they had received.

Respecting and promoting people's privacy, dignity and independence

- Staff understood the importance of seeking consent before providing care.
- The provider promoted the importance of people's privacy and dignity through staff training, policies and within people's risk assessments. For example, one person's risk assessment considered privacy within different environments including within their own home, out of the home when shopping and when providing personal care.
- People were supported to carry out their activities of daily living and staff encouraged people to be as independent as possible. One relative had recognised this with their loved one, they told us, "When we visited, we took [person] shopping...they were able to take part and had their money ready. The service has helped [person] develop their independence skills."

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 registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

End of life care and support

- There was no one receiving end of life care at the time of our inspection.
- Staff had not received end of life training. We discussed this with the registered manager, who recognised the need for this to be carried out.
- People had end of life care plans in place, which included details as to how decisions should be made with consideration of their best interest.

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

- People's care plans identified their preferences, likes/dislikes and information as to what was important to people, were recognised to plan more personalised care. For example, one person's care plan stated, '[Person] likes to have their finger nails painted and pampered with a colour of their choice.' We spoke with this person and confirmed staff had followed this.
- People received their support from staff who knew them well and promoted choice appropriate to their needs. One relative told us, "[Person] sometimes likes quiet time and will go to their room, its fine there for [person] to do that."

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.

- People's communication needs were considered, and the service was meeting the AIS standards.
- Staff worked with other professionals, such as speech and language therapy, to support people with understanding information. We saw staff use a communication book with pictures to help support one person to make choices.

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

- People were supported to attend several social activities, including day centres, discos and overnight trips away. One relative told us, "[Person] always struggled with being sociable, now they have their nails done, their hair done, go out for lunch...they are a more confident person than they were before."
- People's cultural and religious needs were respected and supported. Staff encouraged people to be involved in making decisions about their activity timetables, to ensure their interests were reflected and choice was provided.

- The registered manager supported people to maintain relationships important to them. One relative told us, "[Registered manager] is good at keeping us in touch with [person]; they share photos and when we ring, [person] is always available to speak to."

Improving care quality in response to complaints or concerns

- The registered manager knew the importance of improving care quality and explained how they would act on both informal and formal complaints to prevent any chance of reoccurrence.
- People and their relatives knew how to make a complaint. One person told us they were able to talk to staff if they needed to. A relative said, "We would know who to speak to if we had any concerns and are confident any issues would be resolved."
- The provider had a complaints procedure in place. There had been no formal complaints since the service was registered.

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

- The provider had a person-centred, open and inclusive culture. For example, people's views played a key part in the recruitment of new staff to the service. Feedback was sought following staff completing an initial shadow shift as to how people felt about the way they had been cared for and if staff were able to support them well.
- Relatives provided examples of their experiences in promoting a positive culture. One relative told us, "We are always made really welcome when we visit."
- Staff felt supported to deliver good care. The registered manager provided the opportunity for staff to express their views at team meetings and talk openly about any concerns or issues raised.

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 registered manager was aware of their regulatory requirements as to when and how to notify Care Quality Commission (CQC) and understood their responsibilities under duty of candour, if errors were made.
- Staff were aware of the 'whistle-blowing' policy and knew how to raise concerns with the local authority and the CQC if they felt they were not being listened to or their concerns acted upon.

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

- The registered manager and staff were aware of their roles and responsibilities towards the people they supported. Staff received supervision and the registered manager was passionate in ensuring the care provided met with expected standards of quality.
- The registered manager carried out regular audits to monitor the quality of the service. This included finance, health and safety, infection control, medicine records and care plans. Any concerns were acted upon appropriately in a timely manner and the registered manager was open to feedback where improvement was needed.

Continuous learning and improving care; Working in partnership with others

- The registered manager told us their focus was to ensure this supported living service was compliant with care standards and provided effective outcomes. Any future growth of the service would be explored as appropriate in the future; this included consideration of introducing an electronic system base for record

keeping.

- People's changing needs were considered to further staff knowledge and skills through training. For example, the registered manager had looked into the delivery of specific dementia awareness training in relation to people living with learning disabilities.
- The registered manager liaised regularly with other professionals to ensure people received appropriate care. They have sought advice where needed and worked with agencies to ensure people are cared for by staff trained to meet their specific needs.