

365 Support Limited

365 support services

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

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. This service also provides care and support to people living in 11 'supported living' settings, so that they can live in their own home 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.

Not everyone using 365 Support Services receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. Overall the service currently provides a service to 82 people living in the Southport, Knowlsey, Liverpool and Wirral area.

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.

At this inspection we found the service remained Good.

The service had a registered 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's needs were assessed and recorded by suitably qualified and experienced staff. Support was delivered in line with current legislation and best practice. Risk assessments and support plans had been completed for everyone who was receiving care to help ensure people's needs were met and to protect people from the risk of harm.

People's preferences had been recorded in respect of personal care routines and likes and dislikes for food and drinks. Allergies and other medical information was also recorded.

Staff had been appropriately checked when they were recruited to ensure they were suitable to work with vulnerable adults. The service ensured that staff were trained to a high standard in appropriate subjects. Staff understood how to recognise abuse and how to report concerns or allegations.

The records we saw indicated that medicines were administered correctly and were subject to regular audit.

There were appropriate numbers of staff employed to meet the needs of people who received a service and to ensure they received the support at a time when they needed it.

Policies and procedures provided guidance to staff regarding expectations and performance. Staff were clear about the need to support people's rights and needs regarding equality and diversity.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. We saw clear evidence of staff working effectively to deliver positive outcomes for people. People we reviewed were receiving effective care and support. They gave positive feedback regarding staff support.

People told us that staff treated them with kindness and respect. Support was provided in accordance with people's assessed needs.

People using the service and staff were asked to share their views. These provided very positive responses regarding the support provided.

There was a complaints process. Complaints had been investigated and responded to in a professional and timely manner.

People spoke positively about the management of the service and the approachability of senior staff. There was clear management structure that supported staff. At the last inspection the registered manager and director were not aware of their responsibility to notify the Care Quality Commission of certain incidents. The registered manager has submitted notifications to meet this requirement.

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 has improved to Good. The registered manager was now notifying the Care Quality Commission of incidents as required.	Good ●

365 support services

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 was a comprehensive inspection.

This inspection took place on 14 & 16 August 2018 and was announced. We gave the service 48 hours' notice of the inspection visit because the location provides a domiciliary care service. We needed to be sure that the registered manager would be available to assist in the inspection.

The inspection team consisted of an adult social care inspector.

Before the inspection the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and any improvements they plan to make. We checked the information that we held about the service and the service provider. This included statutory notifications sent to us by the registered manager about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send to us by law. We also contacted the healthcare professionals who commissioned with and monitored the service provided. This helped us to gain a balanced overview of what people experienced receiving a service from 365 Support Services. We used all of this information to plan how the inspection should be conducted.

We spoke with a range of people about the service including two people who used the service and twelve staff members including four support staff, the registered manager and the company director. We looked at the care records of two people who received a service, four staff files including staff training and recruitment records and records relating to the management of the service.

Is the service safe?

Our findings

People said they felt safe when being supported by staff.

Staff understood how to recognise abuse and how to report concerns or allegations. There were processes in place to help make sure people were protected from the risk of abuse. Training for staff took place every year. A 'safeguarding vulnerable adults' policy was available to support staff with aspects of abuse and the procedure to report suspected abuse.

Risk assessments and support plans had been completed to help ensure people's needs were met and to protect people from the risk of harm. We saw risk assessments had been completed for medication, falls, self-neglect and deterioration in a person's mental health. Assessments were reviewed regularly to help ensure any change in people's needs was reassessed so they received the appropriate support.

Staff were recruited safely as the provider had a robust recruitment process. We found copies of application forms and references. Staff had been subject to a Disclosure and Barring (DBS) check, and police checks had been carried out. This meant that staff had been appropriately recruited to ensure they were suitable to work with vulnerable adults.

There were appropriate numbers of staff employed to meet the needs of people who received a service and to ensure they received the support at a time when they needed it. People said they always received the support they needed; staff told us they covered any absence for sickness and holidays. Current vacancies were being covered by regular agency staff. This ensured staff were able to support people when required.

Medication was administered safely by suitably trained staff and was recorded correctly. Staff we spoke with confirmed they had received training. A competency assessment was completed by senior staff to ensure people received their medication safely.

Incidents were recorded when they occurred and analysed each month by the Service Improvement Manager to look for any improvements that could be made.

Is the service effective?

Our findings

We found that the staff at 365 Support Services were well trained and had a good understanding of people's needs. A staff member we spoke with told us the training was "Good quality and can be put into practice." Training courses were completed on induction and were refreshed on a regular basis. Training courses included, mental health awareness, fire safety, drug and alcohol awareness, safeguarding vulnerable adults, and medication. A system was in place to ensure staff were informed when training courses needed to be completed. Records were kept up to date to show when training was available and which staff were due an update.

Staff received regular supervision and had an appraisal annually. All staff we spoke with confirmed they received good support from their colleagues and managers and met with their manager for supervision meetings every two months.

Staff were familiar with their needs as they worked in a team within a supported living setting. People who received a service who we spoke with confirmed this to be the case. Staff had completed training in subjects relevant to the needs of people they supported.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. Applications must be made to the Court of Protection. An application had been made to the Court of Protection for a person supported by the service.

Some people were supported to eat and drink regularly by staff. People told us they were happy with the meals and snacks staff prepared for them and received their meals at suitable times. One person told us, "[Name of staff] is a great cook; I have a roast dinner twice a week."

Where appropriate staff supported people to maintain good health and attended for appointments at their local health service. Staff sought the input of health and social care professionals if people's needs changed. For example, managers at 365 Support Services met regularly with social care and mental health professionals to discuss people's welfare and any additional support they required. Health passports and health action plans were completed where people had complex health support needs.

Is the service caring?

Our findings

A people receiving a service told us that the staff who supported them in their home were caring and kind. They said, "Staff are fabulous; I feel so much better living here, everything is wonderful." We saw that the service had received some compliments from people who used the service. Two compliments received said, "Staff are lovely. They're really helpful", and " You won't get a better service."

Staff we spoke with demonstrated a genuine positive regard for the people they supported. They told us they worked in a supported living setting which meant they provided support to the same people on a regular basis giving them the opportunity to develop good relationships with people. Staff told us the information recorded in the care records also helped them understand what support people required.

Each person who received a service had a 'key worker'. People met with their key worker regularly to discuss their support and any changes they wished to make. A written record was made of these meetings.

A small number of people who were supported by 365 Support Service received support with personal care. One person who received support with personal care told us they were happy with the way staff supported them. They said staff supported them in a respectful and dignified manner and their privacy was maintained.

Managers working for 365 Support Service were aware of the local advocacy service. The service had referred people to the advocacy service when independent support was required.

Is the service responsive?

Our findings

People we spoke with told us they received care when they wanted it and staff supported them where help was required.

Care records we looked at showed people's needs were assessed before receiving a service. Care plans had been developed where possible with each person, identifying the support they required. We found evidence of people being involved in their care plan and providing information about people's preferences and daily routines; their likes and dislikes and some had completed social histories. This gave staff some personal information about the person so they could be supported in their usual and preferred way.

A range of care plans were completed to identify people's needs and the support required. For example, care plans were completed for medication, personal care, cooking and meal planning and community access.

Reference was made regarding people's communication needs to ensure any information was recorded to make staff aware and to enable staff to converse with a person and be understood.

We found people's preferences had been recorded in respect of personal care routines, getting up and going to bed and likes and dislikes for food and drinks. Allergies and other medical information was also recorded. Personal information and care plans were updated each month. Care plans we looked at confirmed this.

The service had a complaints procedure, which was made available to people in the service user handbook. Complaints received were investigated in line with the provider's policy by the Service Improvement manager. People who received a service said they knew how to make a complaint if they were unhappy but told us they were satisfied with the service they received.

Is the service well-led?

Our findings

At the last inspection the manager and director were not aware of their responsibility to notify the Care Quality Commission of certain incidents. Immediately after the inspection this matter was addressed and the registered manager has submitted notifications to meet this requirement.

There was a registered manager in post at 365 Support Services. 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.

The registered manager and Service Director showed a commitment for providing high-quality care and support. This was evident from the feedback received from healthcare professionals. Improvements made in the management structure supported front line staff and a robust quality assurance system across all the supported living services had been developed.

The registered manager was supported by the Service Director and steering group (board), as well as five link managers who oversaw service locations and head office administration and two Quality Assurance Managers.

There were systems in place to monitor the quality of the service provided. Monthly reports which detailed the different aspects of the service provided were completed by, key workers in respect of care records and service managers for medication and health and safety. This gave the registered manager, Service Director and steering group an accurate picture of the ongoing support and drove improvements in the service provided.

The service had systems in place to gather the views and opinions about the service from the people who received the service, their relatives and staff. Questionnaires were given out each year. Any comments or issues were analysed and addressed. Feedback we saw from the 2018 survey was positive from everyone who completed a questionnaire.

Policies and procedures were in place and provided guidance to staff regarding expectations and performance. These included safeguarding vulnerable adults, lone working, whistleblowing, staff supervision and medication management.