

Creative Support Limited

Creative Support - Station View

Inspection report

Holker Street
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Date of inspection visit:
22 September 2022
04 October 2022

Date of publication:
28 October 2022

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Creative Support – Station View is an extra care housing scheme providing personal care to people living in their own flats at Station View in Barrow in Furness. At the time of our inspection there were 30 people receiving personal care from the service.

The accommodation at Station View is managed by Accent Housing. People have their own flats and access to shared communal facilities including a bistro and sitting rooms. People who live at Station View can choose which care provider they use to deliver their personal care.

Not everyone who used 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 also consider any wider social care provided.

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

People were protected from abuse and avoidable harm. Risks to people's safety had been assessed and managed. Staff were trained in how to provide people's care safely and to protect them from infection. There were enough staff to support people. Staff supported people to take their medicines as they needed.

Staff were trained and skilled to provide people's care and to meet their needs. Staff supported people, as they needed, to eat and drink and to enjoy a balanced diet. They gave people support to see their doctors and attend medical appointments if necessary. 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.

Staff treated people in a caring way. There was a small, experienced staff team employed. People knew the staff who supported them. People were asked for their views about their care and support and the decisions they made were respected. Staff respected people's privacy and dignity and promoted their independence.

Staff provided care and support which was responsive to people's needs and wishes. Staff were based 'on-site'. People told us staff attended promptly if they used the call system to request support. People's care was planned and delivered to meet their needs. The provider had a procedure for responding to any concerns about the service. People told us they would raise any concerns with the staff or registered manager. Staff worked with local and specialist services to support people to remain at home as they reached the end of life.

Everyone told us they would recommend the service. People received person-centred care and experienced positive outcomes. People knew the management team and told us the service was well-managed. Staff felt well supported by the managers and were proud of the service they provided. The registered manager was very experienced. They were aware of their responsibilities and were committed to providing high quality

care to people.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and/or who are autistic.

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 5 August 2021 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Creative Support - Station View

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

The inspection was carried out by 2 inspectors.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; 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 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 22 September 2022 and ended on 4 October 2022. We visited the location's office on 22 September 2022. We gathered the views of people, their relatives and care staff from 29 September to 4 October 2022.

What we did before the inspection

We reviewed information we had received about the service since it was registered. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager and deputy manager. We reviewed a range of records. This included 3 people's care records and 3 staff files in relation to recruitment. We looked at records of staff training. We also reviewed records relating to the management of the service and how the provider sought people's feedback. We contacted 3 people and 4 people's relatives. We also contacted 4 staff to gather their views. We reviewed further information the provider sent to us.

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 safe and protected from abuse. Staff were trained in how to identify and report abuse. They told us they would report any concerns to the managers of the service and were confident they would take action in response to any concerns raised.
- People told us they felt safe with the staff who visited their homes. One person said, "I know all the staff and feel safe with them." Another person said, "I feel safe because the carers come in and see if I'm alright."

Staffing and recruitment

- There were enough staff to support people. People told us staff attended promptly if they used the call system to request support.
- Staff told us they had the time they needed to provide people's care.
- The provider carried out robust checks before new staff were appointed. All applicants had to provide evidence of their conduct in previous employment. The provider checked new staff against records held by the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Staff gave people the support they needed to take their medicines. All staff had completed training to give them the skills and knowledge to handle medicines safely.
- People who wished to could handle their own medicines.
- Staff made clear and accurate records of the support they had given people with their medicines. The provider carried out checks on medication records to ensure they were completed properly.

Learning lessons when things go wrong

- The registered manager had systems to learn lessons from incidents to further improve the safety of the service. They shared learning with the staff team and gave people advice about keeping themselves safe.

Preventing and controlling infection

- People were protected from the risk of infection. Staff were trained in infection prevention and control and food safety.
- The provider had ensured staff had appropriate PPE during the COVID-19 pandemic. Staff were trained in how to use PPE effectively.

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

- People received good quality care that met their needs and took account of their preferences. The registered manager had carried out a full assessment of people's needs. The assessments were used to develop a care plan to guide staff on how to support people.
- People, and those who knew them well, had been included in developing their needs assessments and care plans. This ensured staff had information about what was important to people in how they were supported. One relative told us, "They [staff] know my [relative] and how he 'works.'"

Staff support: induction, training, skills and experience

- Staff were well trained and skilled at supporting people. Everyone told us the staff had the skills and experience to provide good care. One person told us, "The staff are very skilled, they know what they are doing."
- Staff told us they had completed a range of training to give them the skills and knowledge to care for people. They said they felt well supported by the managers of the service. One staff member said, "I feel I am supported by my managers in the service."

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

- People received the support they needed to eat and drink. Staff supported people, as they needed, with making meals and drinks. One person told us, "I usually do my own snacks and drinks, but if I am unwell the staff will always make me something, they ask what I want."

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

- Staff supported people, as they needed to access local and specialist healthcare services. People told us staff would "always" support them to contact their doctors if they needed.
- Relatives told us the staff were proactive in identifying if a person was unwell and supporting them to seek medical attention. One relative told us, "The staff are really good, they notice if [relative] isn't feeling well. They always support her to get the doctor or district nurse, it gives us peace of mind knowing they are there." Another relative said, "The staff help [relative] when they need to attend hospital appointments, it means it's one less thing for us to worry about."

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.

- People made decisions about their care and their rights were protected. Staff included people in decisions about their care and respected the choices they made.
- The registered manager and staff understood their responsibilities under the MCA.
- There was no one being supported by the service who required restrictions on their liberty to receive the care they required.

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 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

- Staff treated people in a kind, caring and respectful way. People liked the staff who supported them.
- People spoke highly of the staff and told us the staff spent time with them. One person told us, "The carers are wonderful, they really look after you. They always talk to me." Another person said, "If you aren't well, they always come in and check on you."
- Relatives told us the staff were caring and helpful. One relative said, "They [staff] are really good with him. I like that they treat him as if he was their grandad. They know him really well."

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

- Staff gave people choices about their care and support and respected the decisions they made. One person told us, "Anything I want they will do it."
- People and their relatives told us staff knew what was important to people. They said staff provided care in line with people's wishes. A relative told us, "They [staff] know [relative] really well, they know just how they like things."

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity and promoted their independence. People told us the staff were "friendly but respectful".
- Staff addressed people by their preferred names. People told us staff "always knock on the door" before entering their flats and the room they were in.
- Staff supported people to maintain their independence. They gave people time to carry out tasks for themselves.

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

- People received person-centred care which met their needs and took account of their wishes.
- Staff knew people well and knew their preferences about their support and lives. Each person had a detailed care plan which gave staff information about how to support them. The care plans included instructions for staff to give people choices about their support and to respect people's decisions.

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.

- People's communication needs were identified, and staff provided information to people in their preferred way.
- Staff knew people well and knew the support they needed to share their views or understand information shared with them.

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 registered manager and staff worked with the housing provider to support people to follow activities they enjoyed.
- The housing provider had arranged a variety of activities including visits to local attractions. Staff from the service supported people, as they needed, to join the activities.
- During periods of national restrictions the registered manager and housing provider had arranged activities which people could join while staying in their flats. These had included 'window bingo' and quizzes via the internal intercom system.

Improving care quality in response to complaints or concerns

- The provider had a procedure for receiving and responding to complaints about the service. People told us they had no concerns or complaints about the care provided. They told us they would speak to a member of the management team if they had any concerns. People told us they were confident the management team would act and resolve any concerns they raised.
- Staff knew how people could raise concerns about the service. They said they would give people any

support they needed to share their concerns.

End of life care and support

- People received the support they needed to remain comfortable as they reach the end of life.
- The registered manager had links with local and specialist services which would work with staff in the service to care for people at the end of their lives

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

- The focus of the service was on providing person-centred care which took account of people's needs and supported people to enjoy a good quality of life.
- The service had a very good reputation in the community, and everyone told us they would recommend it. One person told us, "It is absolutely wonderful. Brilliant. I love the place." A relative told us, "I would definitely recommend it, it is a wonderful service."
- People knew the registered manager and deputy manager and how they could contact them. One relative told us, "It is usually [deputy manager] on when I visit. She is very amenable and always makes time to talk to me if there is anything I want to discuss."

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 and registered manager were aware of their responsibilities under the duty of candour. The registered manager had notified us, as required, of significant incidents which had happened in the service. The notifications showed the registered manager understood their responsibilities under the duty of candour. They were aware of the need to share information about incidents with people involved or their representative.

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

- The registered manager and staff were clear about their roles and were committed to providing a high-quality service for people. The registered manager and provider monitored the safety and quality of the service to ensure high standards were maintained and people experienced positive outcomes.
- There were clear lines of accountability between the provider, registered manager and staff. Staff felt well supported and knew who they could contact if they required guidance or advice.

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

- The provider and registered manager had processes to formally and informally ask people for their views about the service. They used people's feedback to further improve the service.
- People and staff told us they were asked for their views and could make suggestions about how the service could be improved. They said the registered manager listened to their views.

Working in partnership with others

- The registered manager and staff worked in partnership with other services to ensure people received appropriate care and support. They supported people to access social care and health services as they needed.
- The registered manager worked cooperatively with the housing provider's on-site manager to ensure people continued to live in comfortable and safe accommodation. They also cooperated on providing activities for people and in providing a 'newsletter' to share information with people.