

Lewisham Nexus Service

Lewisham Nexus Service

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?

Outstanding 

Overall summary

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 and to pilot a new inspection process being introduced by CQC which looks at the overall quality of the service. The inspection was announced two days in advance so that senior managers would be available in the office.

Lewisham Nexus Service (LNS) provides support to about 35 people who have a learning disability. Most people who use the service live in eight supported living houses. Some people who use it live with their family. Most people who use the service have complex needs and require support to communicate their views.

There is a registered manager in post who has worked in the service since it was set up over 20 years ago. A

Summary of findings

registered manager is a person who has registered with the Care Quality Commission to manage the service and has the legal responsibility for meeting the requirements of the law; as does the provider.

All the people who use the service and their relatives that we spoke with told us LNS had fully involved them in planning the delivery of their support. They said the service had delivered good individual support to people which enabled them to feel well, be happy and keep safe. People told us staff were competent and reliable and treated people kindly and with respect.

LNS had ensured people were supported to communicate their preferences and needs and these were taken into account in the way their individual support was planned and delivered. For example, people were enabled to participate in a wide range of leisure, educational and work activities of their choice. LNS sought out opportunities through 'community mapping' of the area around where people lived to identify opportunities for them to become integrated into their local community. The service met the requirements of the Mental Capacity Act 2005. People who may lack mental capacity were given appropriate support to understand and make decisions.

People received appropriate support to access specialist advice and treatment in relation to their health needs. LNS ensured that when people went into hospital they were well supported and their needs were met when they returned home.

The LNS management team undertook regular audits and checks to ensure that each person received safe and effective support. When any shortfall was identified, there was effective follow up action which ensured people received a high quality service. Plans were in place to train people with learning disabilities as 'quality checkers' and be part of the audit team to gain more information about how people experienced the service and what further improvements could be made.

A local authority commissioner told us LNS is a service that benefits from a strong and stable management team who have ensured that the service has continued to develop and improve outcomes for people. Staff were very positive about working for LNS and said their managers listened to them. They were well-trained and told us their managers were available for support and advice. The service had received an external award in relation to the development and management of staff.

LNS had ensured that it implemented best practice and introduced improvements to the service. Managers of the service had forged good links with a number of local and national agencies and used these networks to learn about and implement changes which benefitted people using the service.

Summary of findings

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. People and their relatives told us that Lewisham Nexus Service (LNS) kept them safe and staff were trustworthy. People safely participated in new activities because any potential risks were identified and managed.

People received their medicines safely as prescribed and LNS staff protected them from the risk of infection. People's needs were met because there were sufficient staff on duty.

Good



Is the service effective?

The service was effective. People and their relatives told us that Lewisham Nexus Service (LNS) staff were well trained and carried out their jobs competently.

People were given appropriate help with their nutrition and were supported to access specialist health care when they needed it.

Good



Is the service caring?

The service was caring. People and their relatives told us that Lewisham Nexus Service (LNS) staff were kind and caring and treated them with respect.

LNS staff knew the people they supported well and understood how to communicate with them.

Good



Is the service responsive?

The service was responsive. People and their relatives told us that Lewisham Nexus Service (LNS) delivered support that met their needs and reflected their preferences. The requirements of the Mental Capacity Act 2005 were met. People received appropriate support to make decisions.

People were involved in a wide range of activities of their choice and were supported to be as independent as possible. 'Community mapping' was used to identify opportunities for people to become involved in their local area as equal citizens. LNS ensured people received good support when they went into hospital. People's complaints were responded to.

Good



Is the service well-led?

The service was well led. The Lewisham Nexus Service (LNS) management team was highly regarded by people and their relatives and partner organisations for their commitment to developing the service. People were fully involved in planning their support. The service had received an external award in relation to the development and management of staff.

The service implemented best practice. People benefitted from a high quality service because LNS checked the standard of their support through audit and made continuous changes. Plans were in place to involve people with learning disabilities in the audit team as 'quality checkers' in order to learn more about people's experience of the service and to identify areas for improvement.

Outstanding



Lewisham Nexus Service

Detailed findings

Background to this inspection

The inspection team comprised an inspector and an expert by experience in relation to learning disability services. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

The previous Care Quality Commission (CQC) inspection of the service took place on 18 December 2013 when it was found to meet all the standards we checked at that time. 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 improvements they plan to make. The provider also sent the CQC details of people who could be contacted to gain more information. We then sent out questionnaires asking for people's views about the service. Responses were received from 27 people and their relatives, 16 staff and three community professionals. We reviewed all the information that the CQC held about the service and used it to plan the inspection.

On the day of the inspection we visited the service's office to view six people's records. We spoke with the registered manager and two other members of the senior management team. We also looked at three staff records

and information relating to the management of the service such as audit reports and business plans. We visited three people who received support from the service to check their experience of the service. We checked their care records, spoke with them and observed how they were cared for. We spoke with the two staff who supported them.

After the inspection we contacted five people and six relatives who acted on the behalf of people who used the service to obtain their views. We obtained a report on the quality of the service from the local authority commissioner and contacted three support staff who worked in different parts of the service.

This report was written during the testing phase of our new approach to regulating adult social care services. After this testing phase, inspection of consent to care and treatment, restraint, and practice under the Mental Capacity Act 2005 (MCA) was moved from the key question 'Is the service safe?' to 'Is the service effective?'

The ratings for this location were awarded in October 2014. They can be directly compared with any other service we have rated since then, including in relation to consent, restraint, and the MCA under the 'Effective' section. Our written findings in relation to these topics, however, can be read in the 'Is the service safe' sections of this report.

Is the service safe?

Our findings

People and their relatives told us that they received safe support from Lewisham Nexus Service (LNS). Records confirmed that staff had been trained to identify and report any concerns about abuse or neglect of people who use the service. Staff members we spoke with were knowledgeable on this subject and were able to tell us the steps they would take to safeguard people from harm, including if necessary, reporting concerns to external agencies such as the police or the local authority, if their managers failed to take action. Staff told us they received regular update training on this topic and discussed it at team meetings. The registered manager told us that LNS had recently commissioned a programme of safeguarding training sessions, which were delivered by a local learning disabilities group, to continue to improve staff understanding of this topic.

LNS had taken steps to reduce the risk of financial abuse. People told us staff were trustworthy and followed a set procedure if they handled any money. This included obtaining receipts and the keeping a record of financial transactions. A person said "I am happy with everything. It is all above board and everything is written down." People's records included information on how they were supported to manage their money. Staff told us they understood what records had to be kept and their responsibilities when supporting people to pay for items and said managers made regular checks of people's finances and financial record keeping.

People participated in a wide range of activities. A relative told us, "[Person's name] has been with the service a long time. Any activities they assist [person's name] with are always risk assessed. There's been no accidents in that time." People's records confirmed that individual risks to people were identified and managed.

Staff told us they received training and support in managing the needs of people whose behaviour sometimes challenged the service. Records showed that incidents were analysed and advice obtained appropriately from specialists, such as psychologists, in relation to minimising any risks to people and staff. People's records included guidance for staff on avoiding any unnecessary

distress to people and how to manage potentially difficult situations. For example, one person's record said 'avoid moving objects I have placed' and 'stand back, hold hands up, be calm'.

A relative explained to us how risks were managed by the service without compromising people's need to develop their independence. "They are helping [person's name] to travel safely by going with them to the shops and they now come home alone on the bus. They are helping them to be more independent. For example, they now take their own bath." People and relatives told us risks were reassessed at regular review meetings which they participated in.

Staff told us they had been trained to deal with emergencies such as a fire or a person falling ill. Records confirmed that staff received First Aid training and supported people to practice evacuation from their house in the event of a fire.

The registered manager told us that staffing levels at each supported living project were based on the needs of the people living there. At the supported living house we visited we observed that staff were able to give people individual attention in relation to their needs. Staff told us that they thought staffing levels were safe and there were adequate cover arrangements for staff who were sick or on leave. A person's relative said, "The service is very reliable."

We checked three staff records. They included copies of key documents such as application forms, references, criminal records checks and details of people's skills and qualifications. It was clear that recruitment practices were robust. People were positive about the knowledge and experience of the staff.

Some people who used the service received help with their medicines. Relatives told us that from their observation people received their medicines correctly. Six people's medicines administration records that we checked had been fully completed by staff. All of these showed that people had received their medicines as prescribed for the previous week. Some people received 'as required' medicines but were unable to request these themselves. In each instance there were clear guidelines for staff on the circumstances when the person should receive their 'as required' medicines.

Regular checks were made by managers of the service to ensure medicines policies were followed. In addition, a pharmacist from the local Clinical Commissioning Group

Is the service safe?

(CCG) had recently audited the service. They informed us, "My involvement with LNS is to support the staff team to manage medicines. This includes training, pharmacy audits, etc. Senior management and the various project leaders and their staff are always keen to address any action issues highlighted in audits, co-operate with myself and the medicine management team at the CCG to improve medication management."

Some people used specialist equipment such as wheelchairs. A person's records included clear guidance about how they should be positioned in their wheelchair and how and when the lap belt and foot plates should be

used. We observed during the inspection that the person had received their support in line with these guidelines. Their records also showed that their wheelchair had been recently checked by the wheelchair clinic to ensure that it was safe and suitable for them.

Staff told us they understood the service's arrangements to reduce the risk of infection. They said they had a constant supply of gloves and aprons to use when it was appropriate to do so. People and their relatives had no concerns in relation to this. The supported living service we visited appeared clean and staff explained the cleaning routine they followed to maintain hygiene.

Is the service effective?

Our findings

People told us they received support from Lewisham Nexus Service (LNS) that effectively met their needs. We received positive responses from all the people who completed questionnaires about it. For example, one person said of the service, "Staff help me to live a good life and develop my skills, self confidence and self-esteem, and to be happy." People said that staff completed all the tasks they should do when giving them support and allowed them to be as independent as possible. A person's relative told us, "The staff have all seemed well trained and have been of very high quality."

The provider ensured that staff had the knowledge and skills to meet people's needs. Ten staff who completed the CQC questionnaire on the service all said they received effective training and support for their job. A support worker told us, "I very much enjoy working for LNS and have been with them for just over two years now. I am always getting lots of training and have learnt so much through LNS to become a very good support worker."

During the inspection we observed how two support workers interacted with people. They delivered support to each person in line with their support plans and encouraged them to be as independent as possible. For example, a support worker encouraged a person to go upstairs on their own to show us their bedroom and how they kept it tidy. All five support workers we spoke with told us that they received regular 'refresher' training in key topics such as health and safety. They said their managers were easily available to give them advice and support, including at times which were outside normal working hours.

Managers checked the competence of staff in relation to the support they provided. Records were made in relation to how staff performed when supporting people with for example, their personal care and to receive their medicines. There was evidence in staff files that where managers had identified any concerns they were followed up with staff member. This ensured people received their support from suitable staff.

Three staff files evidenced that staff had received regular one- to-one supervision and an appraisal of their skills which identified any training needs. A staff member told us, "Supervision and training are very good. I have an NVQ in

Social Care and am told when new courses come up or I need a refresher course." Staff records confirmed that the provider had ensured staff were well trained. For example, a support worker had received training in the past two years on First Aid, communication with people with learning disabilities, visual impairment and learning disability, medicines management and working with people with challenging needs. A pharmacist told us,

"LNS regularly send people on training workshops that I run/support - after training they put into practice what they have learnt."

People's needs were assessed in relation to the amount and type of support they needed to eat and drink and maintain a balanced diet. For example, a person's records explained how they were supported in relation to this, "[Person's name] prepares his own sandwiches on a five week rotational menu which he helps create."

Notes of the February 2014 management meeting showed that it had included a session from a speech and language therapist on the importance of screening people with learning disabilities for swallowing difficulties to address any risks in relation to choking. Staff we spoke with were aware of this issue and people's support was effective in relation to their needs. For example, a person's records showed LNS staff had arranged for them to see a speech and language therapist who had helped the service to prepare detailed eating and drinking guidelines. These explained in detail how the person should be supported and said, "I need food that is soft or mashed, use gravies and sauces to make it moist and need support with my special utensil to eat slowly as I cannot chew my food." The person's review meeting notes confirmed that they received assistance with their meals in this way.

People were given support to keep healthy and access appropriate specialist services. A community professional told us in a questionnaire, "They ask me for advice and are open to discussion and receive feedback in a positive way." People's records included full details of their health needs and how they were met. For example, one person's 'health check information report' stated, "I see my dental hygienist every three months" and "I had an eye test July 2013." A person's relative told us, "The care staff are good at spotting things and making sure they or I call in others such as physiotherapists, the doctor or the district nurse."

Is the service effective?

When we visited people using the service we found that one of them had a slight cough. A support worker explained to us how staff had recognised two days previously that the person, who is non-verbal, was coughing and tired. Records showed that staff had arranged for the person's GP to visit in order to assess and treat them. Antibiotics had been prescribed and records showed the person had received them appropriately. Staff

had supported the person to go to hospital for a chest X-ray. The support worker told us, "We are keeping a very close eye on the situation because [person's name] is especially vulnerable to chest infections. We are writing down how they are and discuss it at shift handover. We will ask the GP to come back if necessary but they seem to be getting better." This demonstrated that LNS supported people to access the healthcare they needed.

Is the service caring?

Our findings

People and their relatives told us that staff were caring. A relative told us "[Person's name] seems to really like the staff who are very gentle and loving to them." A person said, "They have helped me for a few years. They are respectful and polite to me. Sometimes we go shopping and they are always very good to me." Another person said, "I have just had support to go on a holiday. It was great and the staff do not take over and tell me what to do."

Another comment was, "[My relative] is unable to tell us about the service and care. We as his family can only assume from the surface and his responses from time to time. We were very concerned about the treatment they would get when they left home but we were very fortunate to find a care provider with loving staff who look after them so well, that our minds were put at ease. Most important of all they love where they live and get on very well with the staff."

We observed during the inspection that staff interacted with people in a friendly way and showed them respect. For example, a support worker said to a person who was non-verbal, "We are watching this TV show together whilst I do some ironing aren't we [person's name]? It's your favourite show isn't it?" The person indicated their agreement by nodding. People's records included information about their individual communication needs. For example, one person's records had this information: "Look me in the eye when talking to me, if you use too many words I may become confused."

Staff told us that people's communication needs varied and some people used pictures, hand gestures or pointed at objects to show what they wanted. People's records included guidelines for staff to follow when communicating with them to clarify how they wished to be supported. A

support worker told us, "I know the people I support very well, I understand the support they need and can understand from body language and other signs what they want. We are trained to find a way of communicating with people."

Staff said they involved people in developing a copy of their support plan which they could understand. This included photos of them, their friends, family, people, places and activities which were of personal interest to them.

Staff we spoke with were able to explain how they treated people with respect. For example, a support worker told us how it was important to acknowledge people's feelings in relation to their interests and what they wanted to do. They said "[Person's name] has a very strict routine each day which is very important to them. We respect their wishes about that." People's records included information on their likes and dislikes and 'what people admire about me'. Staff told us that the process of gathering this information assisted them to engage with people and to value them as individuals. Staff told us they were trained to respect people's privacy and treat them with dignity when giving support. A staff member said, "I am careful to respect people's personal space. They have their room the way they like it and I knock when I go in. I close the door when giving personal care."

A person's relative told us that the service gave people choice about how they received their support, "We are very pleased with LNS. Great care is given to match [my relative] with carers who understand and know them well and help them to live a good life and develop their skills, self confidence and self-esteem, and to be happy." Records demonstrated that a local advocacy service for people with a learning disability had been appropriately involved by the service to represent people's views when family members were not able to do so.

Is the service responsive?

Our findings

People told us that Lewisham Nexus Service (LNS) was responsive. A person's relative told us, "We've been very pleased because there is attention to [person's name]'s needs and the organiser always lets us know who is coming along." Another person's relative said, "They always turn up on time. I know how important this is for [person's name] that people stick to a routine if they are helping him."

LNS delivered support which promoted social inclusion, met each person's individual needs and enabled them to fulfil their potential. A person's relative said, "They do go the extra mile as a service and the support for [my relative] has been in place for over 10 years and has helped with their adult life after college. For example, [my relative] has taken part in groups and activities including being on stage and they go to a self-advocacy group and work one day a week." Another person's relative said of the service, "It has been of benefit to both [person's name] and to us and it has worked as it has been planned. As a result [person's name] has had a quality of life which has been as good as we or they would have wanted."

The service ensured that as far as possible people were supported to make decisions. Training records showed that staff were trained in understanding the key principles of the Mental Capacity Act 2005. Staff were knowledgeable about their duty to uphold the rights of people who may lack mental capacity by providing information in an accessible format. Staff were able to explain to us that some people did not have the mental capacity to make some decisions and if this was the case 'best interests' decisions were made by professionals and the people who knew the person best.

People's care records included information about their diverse needs. There were details in relation to their food preferences, interests and cultural background. For example, a person's religious needs were explained and their support plan included details about how they were supported to attend a religious service each week. Staff we spoke understood people's individual needs and how they were met. For example, a support worker said, "[Person's name] loves going out, especially to the gym and the cinema. They also love dancing and play the guitar and go to music classes. We support them to do those things and are currently supporting them to learn money skills. They are practicing this and learning how to identify the different

notes and coins and getting the right change." We saw that these arrangements were written into the person's 'easy read' support plan which the person had helped to develop.

The service had recently employed a staff member to undertake 'community mapping' of the area close to each supported living project to identify local resources, shops and key people. This aimed to promote opportunities for people with learning disabilities to develop friendships and become more independent. For example, a person who was previously supported by staff to attend a religious service was now attending with the assistance of people who went to the same service.

People told us they received their support as planned from a regular group of staff. A person told us, "The staff always come and are mostly on time but sometimes they are late and they try to let me know." People's support was reviewed regularly to ensure it met all of their needs. A relative said, "I'm constantly involved in the care. This includes a review every six months. [My relative] is supported to be able to contribute at these."

The service had a complaints procedure which people's relatives told us they were aware of. One relative told us, "We have not formally complained at any time but know we could if we needed to. We can always sort things out anyway because we are regularly in touch with staff." The procedure was also written in accessible format. Some people we spoke with told us they were aware they could make a complaint. A person said "I am happy enough so I haven't complained about anything but know I can." A record had been made of a complaint made in May 2014 by a person in relation to their support. Their complaint had been investigated and it had been resolved to their satisfaction.

The registered manager told us that there were arrangements in place to ensure people could receive good quality care when they moved from the service into hospital. We saw that the service had prepared for each person a 'hospital passport' which explained their background and needs. Staff ensured that people took this document with them to hospital, as well as information on their communication needs, so that nursing and medical staff had easy access to information about them to inform their in-patient care. Staff from the service continued to support people whilst they were in hospital, particularly in relation to their personal care, diet and communication.

Is the service responsive?

Additionally, the service had established links with key hospital staff to ensure that when people were discharged

home this was done so safely. For example, staff from the service made sure any special equipment people needed was in place and their medical follow up appointments had been set up.



Is the service well-led?

Our findings

A service commissioner and a healthcare professional told us that Lewisham Nexus Service (LNS) was a well led service. People told us the service was good. A person's relative told us, "The manager is passionate about getting things right."

A local authority commissioner told us, "We have always viewed LNS as good partners to the Council who deliver a good quality service to adults with learning disabilities in the borough. LNS are quite an innovative provider and have been forward thinking and proactive in looking to develop new services." A pharmacist said, "LNS are a well-regarded and accessible service. They engage very well with statutory agencies." The registered manager told us that the service used their links with local professionals to get advice about service provision and policy changes.

LNS had a business plan, which set out its vision to support people to be equal citizens, exert control and independence and to lead fulfilling lives. People and their relatives confirmed that LNS put these values into practice. They told us that they were fully involved in planning the delivery of each person's support, and giving information to the service about the person's background and family traditions. We saw evidence in meeting notes and people's files that families had been consulted about how people should be supported to maintain contact with their extended family. The service had identified this issue as an area for improvement. Meetings were held with staff teams on this, so that they could include this issue when planning people's support. Progress in relation to people's contact with their extended family was being monitored through the service's internal audit system.

The majority of people who use LNS supported living had high support needs and limited communication. The registered manager told us LNS also supported other local people with learning disabilities, many of whom had become active in the local People's Parliament and were involved in choosing their representatives in the borough to change the approach to the provision of services and inform commissioners. At the time of the inspection LNS had plans in place to train people with learning disabilities who use services as 'quality checkers' and to become part

of the internal audit team. The aim was for the 'quality checkers' to obtain good quality information on people's experience of the supported living services in order to identify areas for improvement.

The service had recently started to use 'community mapping' to identify community activities close to each supported living house that people could become involved in rather than those that were specifically for people with learning disabilities. A person told us, "I like going to gym and football." This promoted people's integration with their local community.

Staff we spoke with told us they understood the organisation's values and how they applied to them in their own job role. They were positive about the culture of the service. A member of staff said, "I enjoy my job very much and love to support people to reach their goals and ambitions in life." Another staff member said, "LNS is a wonderful company to work for because management listens to staff through the support worker forum and the service users' needs are met which enhances their independence through choices."

Senior managers explained that staff views were obtained through a variety of methods including team meetings, through quality audits and formal supervision and annual appraisals. LNS received the 'Investors in People' bronze award in 2012. This is a recognised award in relation to managing people. The 'Investors in People' report on the service stated, "There is a strong focus on

continuous improvement and a very approachable team of senior managers who work well together and are open to feedback."

There were effective systems in place for managers to receive information on incidents and accidents. Staff told us that managers often used the information from incident reports to make improvements to the service. For example, they said that senior managers were in contact with them in relation to incidents of challenging behaviour to ensure that appropriate action had been taken to ensure the safety of staff and people who use the service.

There was a comprehensive system in place to drive the quality of care people received. Quarterly quality review reports were completed in relation to each supported living project covered by the service. These reports detailed the issues that were identified at the previous audit and the actions that had taken place to improve outcomes for



Is the service well-led?

people. For example, an April 2014 report noted that the previous report had recommended, "Refer [person's initials] to speech and language regarding creating a sensory environment, communication and sensory programmes." This report noted that the referral had been made and communication tools were being used.

The reports evidenced that managers undertaking the audits had a good understanding of the steps required in order to achieve good quality care that reflected best practice in relation to support for people with learning disabilities. They demonstrated that the service was open in relation to the difficulties in achieving this. For example, the report stated "staff need to understand why people are undertaking particular activities and look at the wider picture about this." Managers explained that this is in relation to the service's value of seeking to involve people in activities that were meaningful to them and engaged them as equal citizens.

The reports also covered the quality of staff relationships with people who use the service. There was detailed analysis in relation to this and recognition of the work done by staff. For example, the report stated "[Person's initials] – it is great to see that they now have a relationship with all the staff that support them and is interacting more with fellow tenants." Staff told us the outcome and recommendations from these reports were discussed in team meetings and then people's key workers were

responsible for making the necessary changes with the support of their managers. This ensured staff understood their role in terms of putting into practice the service's values to improve outcomes for people.

Other key areas in relation to the quality of the service were covered in these reports, such as record keeping, feedback from families and staffing and staff support. Staff completed questionnaires in relation to the quality of team work, supervision and training. For example, staff gave information on the quality of on-the-job coaching and the availability and approachability of their manager. The findings were reported and discussed at team meetings. Staff told us they felt this system was key in making LNS an open organisation that listened to staff.

People and their relatives told us they could raise any concerns they had and there were no difficulties in communication with the service. Managers told us that they linked with other organisations to ensure that LNS delivered a high quality service. For example, managers attended meetings with local employers and the voluntary sector to ensure that they could maximise work opportunities for people. In addition, they were members of development organisations for services for people with learning disabilities. Managers explained that through membership of such groups they had learnt about best practice and new developments and applied them to their own organisation. For example, the new 'community mapping' which was being undertaken by the service, was developed as a result of LNS's link to a development forum for learning disability organisations.