

## Individual Support Solutions Ltd

# Powell House

### Inspection report

Powell House  
Church Street  
Nuneaton  
Warwickshire  
CV11 4DS

Date of inspection visit:  
11 June 2019

Tel: 02476349561

### 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: Powell House is registered to provide personal care to people living in their own homes, including supported living locations. At the time of our visit the agency supported 11 people with the regulated activity: 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.

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:

People felt safe using the service and the staff team were aware of their responsibilities for keeping people safe from avoidable harm.

Risks associated with people's care and support and been assessed and appropriately managed.

Recruitment processes ensured only suitable people worked at the service and suitable numbers of knowledgeable and skilled staff were available to meet people's needs.

People were protected by the prevention and control of infection. The staff team had received training in infection control and the appropriate protective equipment was provided.

The registered manager ensured lessons were learned when things went wrong and continually looked at ways of improving the service.

People's care and support needs had been assessed and they were supported to live healthier lives. Comprehensive plans of care were in place and people received the care and support they preferred.

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's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

The staff team were kind and caring and treated people with respect.

People's thoughts on the service were regularly sought and monitoring systems were in place to check the quality and safety of the service being provided.

The rating at the last inspection: The last rating for this service was good (report published 14 September 2016)

Why we inspected: This was a planned inspection based on the previous rating.

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.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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

Details are in our Safe findings below.

Good ●

### 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 ●

# Powell House

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

**Inspection team:** The inspection was carried out by two inspectors, and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

**Service and service type:** Powell House is a domiciliary care agency and supported living service providing community support and personal care to people living in their own homes so that they can live 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.

The service had a registered manager registered with the Care Quality Commission. 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 the service notice of the inspection visit because it is a domiciliary care agency/supported living service and we needed to be sure the registered manager would be in.

The Inspection site visit was carried out on 11 June 2019. We visited the office location to see the registered manager, the office staff and support workers; and to review care records and policies and procedures. People using the service were contacted on the 11 and 12 June 2019.

**What we did before the inspection:** The provider had completed a Provider Information Return (PIR), this is information the provider is required to send us at least annually that provides key information about the service, what the service does well and improvements they plan to make. We reviewed the PIR and other information we held about the service such as notifications. These are events which happened in the service

that the provider is required to tell us about. We sought feedback from the local authority who monitor the care and support people received and Healthwatch Warwickshire, the local consumer champion for people using adult social care services. We used all this information to plan our inspection.

During the inspection: We spoke with one of the people using the service and three relatives. We spoke with the registered manager, the branch manager, the team leader and two support workers. We reviewed a range of records about people's care and how the service was managed. This included two people's care records. We also looked at associated documents including risk assessments and a sample of medicine records. We looked at records of meetings for the staff team, staff training records and the recruitment checks carried out for new staff employed at the service. We also looked at a sample of the providers quality assurance audits that the management team had completed.

After the inspection: The registered manager provided us with copies of documents requested to demonstrate compliance with the regulations.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. Good: This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with the staff team who supported them. A relative explained, "[Person] talks to me when feeling unsafe or unhappy. We always have a meeting, phone call or visit [from a member of the management team] if I don't feel comfortable. [Person] does seem to be happy with the people who care for them."
- The staff team had received training on the safeguarding of adults and knew their responsibilities for keeping people safe. One explained, "I would report it [any concern] to my manager and if they didn't deal with it, I would go externally. I am 100% confident the management would deal with any issue."

Assessing risk, safety monitoring and management

- Risks associated with people's care and support had been assessed. Where risks had been identified these had been appropriately managed. This made sure risks to people's health and welfare had been wherever possible, minimised and they were kept safe from avoidable harm.
- People were encouraged to take positive risks. This meant people were not restricted from doing something just because it was deemed to be unsafe. We saw when someone wanted to do something, they were supported to find ways to reduce the risks associated with the activity and enabled to carry out the activity as safely as possible.
- Personal emergency evacuation plans were in place. These showed how everyone must be assisted in the event of an emergency.

Staffing and recruitment

- The provider's recruitment processes remained robust ensuring only the right people with the right values were employed at the service.
- There were sufficient numbers of suitable staff available to meet people's care and support needs.
- People told us they received their care and support from support workers who on the whole, attended on a regular basis. One explained, "Even though the staff are different sometimes, I like having a change, it makes me happy." A relative explained, "I went to see the staff at Powell House, as they did have a few staffing issues. It's been addressed recently though, and they have recruited new members."
- Staffing rotas were monitored closely by the management team and we were told should there be an occasion where support workers could not cover calls; a member of the management team would undertake this. Support workers we spoke with confirmed this.

Using medicines safely

- Support workers had received training in the safe handling of medicines and their competency was regularly assessed. This ensured they supported people in a safe way.

- For people who needed support to take their medicines, information had been included in their support plan and a risk assessment had been carried out.
- Audits were carried out on the paperwork held to make sure records were up to date and people had received the appropriate medicine support.

#### Preventing and controlling infection

- An infection control policy was in place for the staff team to follow and appropriate personal protective equipment was available. This included gloves, aprons, hand sanitiser and antibacterial wipes.

#### Learning lessons when things go wrong

- The registered manager ensured lessons were learned and improvements made when things went wrong. For example, following two incidents that had occurred within the supported living side of the service, changes to the assessment process had been made. This ensured people moving into the services were compatible with the people already living there.

# 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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 had been visited prior to their care and support package commencing to determine what help and support they needed. One person told us, "Prior to starting care, the managers visited me and introduced me to the team."
- A comprehensive assessment had been completed and people's preferences regarding the care and support they wished to receive had been explored.
- People were supported to make choices and decisions about their care and support daily. A relative told us, "[Person] likes to buy their own food when shopping as they get to choose what they want."

Staff support: induction, training, skills and experience

- The staff team had been appropriately supported when they had first started work at the service. An induction programme had been completed and relevant training had been provided. Opportunities to shadow experienced members of staff had also been made available. One staff member explained, "I was able to shadow others, I felt I needed a little bit more, so I got it."
- People felt the staff team were appropriately trained and had the relevant skills and knowledge. A relative explained, "I think they've got the right training to support [person] needs."
- People's needs were met by a staff team that were effectively supported and supervised. One to one meetings and annual appraisals were arranged, providing the staff team with an effective support network.

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

- The staff team supported people to have sufficient food and drink when they supported them at meal times. They knew the importance of making sure people were provided with a healthy balanced diet whilst providing them with the food and drink they liked.
- For people who were able, the staff team supported them to prepare their meals and drinks for themselves.

Staff working with other agencies to provide consistent, effective, timely care

- The staff team worked together within the service and with external agencies including commissioners and healthcare professionals to provide effective care. This included providing key information to medical staff when people were transferred into hospital.

Supporting people to live healthier lives, access healthcare services and support

- The staff team were observant to changes in people's health and when concerns had been raised, support from the relevant healthcare professionals had been sought. One person told us, "Carers help by organising

doctors' appointments. They've had to accompany me and give me moral support, chatting to me and allowing me to open up about my views and opinions of the healthcare I have received."

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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty. We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met. We found they were.
- The registered manager was working within the principles of the MCA. New documentation had been developed to ensure mental capacity assessments were decision specific, detailed how decisions were reached and included who was involved in the decision-making process.
- People confirmed support workers always sought their consent before providing their care and support.

# 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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 told us the staff team were kind and caring and they looked after them well. A relative told us, "[Person] does seem to be happy with the people who care for them. They [staff team] look after them very well from what I see."
- The staff team understood the importance of promoting equality and diversity and respecting people's beliefs. Staff had received training on equality and diversity and respected people's wishes with regards to their care and support.
- People's support plans had the information they needed to enable the staff team to provide individualised care and support.
- People were encouraged to maintain relationships that were important to them. One person told us, "I'll get visitors from time to time, my brother and I enjoy the social side and appreciate the company. My family around me lightens the mood."

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

- People were fully supported to make decisions regarding their day to day routines and express their views about their personal preferences.
- The staff team were aware of the importance of supporting people to make their own day to day decisions. One explained, "[Person] will do some cooking with you, they need prompts but we support them to make decisions for themselves."
- People's preferred routines, their likes and dislikes and personal preferences had been explored and included in the documentation kept in people's homes.

Respecting and promoting people's privacy, dignity and independence

- Support workers gave examples of how they preserved people's dignity when supporting them. One explained, "We close doors and ask them what they want and get their consent. It's about respecting their choices and routines."
- People were supported to remain as independent as possible. A relative explained, "[Person] is quite independent, they may need help washing but mainly supervising more than anything. The carers support them with this."
- A confidentiality policy was in place and the staff team understood their responsibilities for keeping people's personal information confidential. People's personal information was stored and held in line with the provider's policy. A support worker explained, "We make sure documents are kept private with documents kept under lock and key and we don't discuss people in public."

## Is the service responsive?

### Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 had been consulted and fully involved in the planning of their care with the support of their relatives.
- People's plans of care were very much centred on them as a person. They were comprehensive and included information to enable the staff team to provide the care and support each person needed. The plans of care included information on people's history and how they wished their care and support needs to be met. Relevant emergency contacts and details of risks that had been assessed were also included.

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 staff team had a good understanding of people's social and cultural diversities and their personal values and beliefs. They went out of their way to support people to follow their interests and take part in activities that enriched their lives.
- The things that were important to people were identified and enjoyed by them on a daily basis. A relative explained, "They [staff team] have to stay 24 hours as [person] needs 24-hour care, one-to-one at all times. [Person] goes where they want. They attend activities such as day centres, and home visits where friends come over for tea in the evening." Another explained, "Powell House look after everyone's needs, they play snooker, have drama classes, all sorts of activities are available."
- People were supported to utilize the skills they already had, learn new skills and work towards and achieve their future goals. A comment from one of the people using the service stated, "They [staff team] supported me to achieve one of my goals to go to [place] this year, I had a great time."
- One of the people using the service had been supported by the staff team to successfully find volunteer work at a local charity shop.

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.

- The staff team were trained in Makaton (a simple version of sign language) and information within the service was available in large print and pictorial form.

Improving care quality in response to complaints or concerns

- A complaints process was in place and people knew who to contact if they were unhappy about anything. A

relative told us, "[Person] has had an issue [in the past] where they were shouted at. We reported them to the management as soon as the incident happened. The carer has since been removed from our package so [person] has freedom of choice."

#### End of life care and support

- There was no one requiring end of life care at the time of our visit. The management team explained If a person required this, a plan of care would be implemented, and the required care and support would be provided with the support of the relevant healthcare professionals.

# 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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- Staff understood the provider's vision for the service and they told us they worked as a team to deliver good standards. One explained, "Our aim is to promote independence for service users and to support them as much as possible to enjoy life."
- The staff team knew people's individual needs and ensured good outcomes for people.

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 management team were open and honest when things went wrong, and lessons were learned to ensure people were provided with good quality care.

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

- People told us the service was well managed and the registered manager and the management team were welcoming and approachable. A relative told us, "People are very easy to talk too, they are very nice people, we have no complaints." Another explained, "The office is easy to contact, and I have never been left in the dark." [Regarding their relative's care].
- Systems were in place to monitor the quality and safety of the service. Regular audits on the paperwork held had been carried out. This included the daily records the staff team completed and medicine records.
- Staff at all levels understood their roles and responsibilities and the registered manager was accountable for the staff and understood the importance of their roles. The staff team were held to account for their performance where required.
- The registered manager understood their legal responsibility for notifying the Care Quality Commission of deaths, incidents and injuries that occurred or affected people using the service. This was important because it meant we were kept informed and we could check whether the appropriate action had been taken in response to these events. They were also aware of their responsibility to have on display the rating from their latest inspection. We saw the rating was clearly on display.

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

- People using the service had been involved in how the service was run and their views and thoughts were regularly sought. This was through meetings and the use of surveys. Comments in one survey returned

stated, "It has all been great. So just to say well done and thank you, we couldn't have hoped for a better outcome for [person]. They have got their own life, we know they are happy and settled and they love it." A relative told us, "The office gets in touch whenever there is an open day or coffee morning and I'll get invited to go and support them."

- The provider was committed to providing services that were led by the people they supported and enabled them to learn, develop and achieve as people. A relative explained, "Overall, we are happy with the service and it's all a working progress towards [person's] own independence."

- Staff members had been given the opportunity to share their thoughts on the service and be involved in how the service was run. This was through staff meetings and day to day conversations with the management team. One staff member told us, "We have team meetings and when we speak out, management listen."

#### Continuous learning and improving care

- The registered manager and management team continually looked at ways of improving the service for the benefit of the people using it. For example, new policies had recently been purchased which would be made available electronically to the staff team for their information.

#### Working in partnership with others

- The management team worked in partnership with commissioners, the local authority safeguarding team and other healthcare professionals to ensure people received the care and support they needed. The registered manager also worked with other organisations including the learning disability partnership board and the Warwickshire provider forum to help improve the lives of people with a learning disability.