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Hillview Independent Living Office

Inspection report

Hillview Farm
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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service effective?

Inspected but not rated

Is the service caring?

Inspected but not rated

Is the service responsive?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

This inspection took place on 20 June 2017. The inspection was announced. We gave the provider 48 hours' notice of our inspection to ensure we could meet with the provider of the service on the day of our office visit.

Hillview independent Living is a domiciliary care agency which is registered to provide personal care support to people in their own homes. On the day of our inspection visit, the service was supporting one person. As we could not answer all the key lines of enquiry (KLOE) against the regulated activity we were not able to award a rating for the service.

Not everyone using Hillview Independent Living receives the 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.

The registered manager also owned the service. 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 felt safe and assured the support they received helped them manage their health. The registered manager completed background checks needed to assure the suitability of staff before they commenced work. The registered manager understood the training needed when supporting people with their medicines.

The registered manager undertook training to ensure people were supported based on best practice. The registered manager understood the need to obtain a person's consent before supporting them with their personal care.

People liked and valued the care and support offered by the registered manager. People felt involved in day to day decisions about their care and felt their feedback was listened to. People felt their dignity and respect was promoted

People were able to direct their care and talk about the care they needed so it was individual to them. As people's needs changed they were able to change their care to meet their changing circumstances.

The registered manager understood the importance of reviewing and updating people's care so that it met people's expectations. People felt able to contact the registered manager and feedback what they thought of their care. Policies and procedures were in place to support the registered manager develop quality assurance systems. The registered manager was working to develop their networking skills in order that they can develop relationships with other local stakeholders.

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 felt safe around the registered manager who understood how to keep people safe. People were assured the registered manager understood their needs and how to manage the risks to their health.

Inspected but not rated

Is the service effective?

The service was effective.

The registered manager updated their training to ensure they supported people in line with Best Practice. People's consent was obtained before care was delivered.

Inspected but not rated

Is the service caring?

The service was caring.

People were able to direct and influence their care on a day to day basis. People's dignity and respect was promoted.

Inspected but not rated

Is the service responsive?

The service was responsive.

People contributed to planning their care in order that it was individual to their needs. The registered provider understood their needs. People had access to the provider's complaints procedure and understood how to complain.

Inspected but not rated

Is the service well-led?

The service was well led.

People approached their registered manager to review and discuss their care needs. People found the service well run. The registered manager had policies and procedures in place and was working to develop their quality assurance systems further.

Inspected but not rated

Hillview Independent Living Office

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.

Inspection site visit activity took place on 20 June 2018. The visit to the office was to speak with the registered manager. The inspection team consisted of one inspector.

We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

We reviewed the information we held about the service and looked at any notifications they had sent us. A notification is information about important events which the provider is required to send us by law.

During the inspection, we spoke with one person receiving support. We looked at the provider's policies and procedures, compliments and quality checks completed on behalf of the registered provider. We also requested feedback from the local authority.

Is the service safe?

Our findings

People felt safe when the registered manager was providing care in their homes. They told us they were "Absolutely" safe around them. People described the registered manager in an affectionate manner, and that they were very comfortable in their company.

The registered manager understood their responsibility to safeguard people they were caring for. Although they had not yet needed to submit any notifications, they understood how to do so. They told us about the training they had undertaken and how this had reinforced their knowledge. They understood their obligations on how to report any concerns they had both with the CQC and local authority.

The registered manager understood how people needed to be moved safely and some of the risks associated with their health because they had assessed and documented them in people's care plans. Where people needed help with their mobility the registered manager understood how to support them safely, with the use of specialist equipment if needed. We reviewed care planning documentation and saw there were risk assessments completed that detailed people's needs together with review dates. The care plans showed when people's needs had changed and what action had been taken.

The registered manager had not needed to recruit any staff. As yet, they did not employ any other staff, but told us they understood they needed to assure themselves of the person's background and their suitability to work at the service before they employed them. They told us they would undertake Disclosure and Barring Service checks as well as follow up any references that had been requested.

Not all people receiving support with their care, needed help with their medicines. The registered manager understood any training to support people with their medicines would need to be updated regularly to ensure it was safe for them to support people correctly. They also understood how to record how they had supported people.

Is the service effective?

Our findings

People told us the registered manager had the skills and knowledge needed to support them. They told us they were "very confident" with the registered manager.

The registered manager had kept their professional knowledge as an Occupational Therapist up to date by maintaining their membership of the Royal College of Occupational Health as well registration with the Health Care Professionals Councils. They told us any support they offered was based on best practice. As a result of this they were required to attend training and demonstrate how their knowledge had been kept up to date. They told us they applied this learning to the people they were supporting. People told us they were pleased to have the support they received.

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.

We checked whether the service was working within the principles of the MCA. The registered manager had an understanding of the Act. They told us about an occasion care had been arranged for someone by their family, but when they spoke with them, it was clear the person did not want their help. They told us they understood the person's right to make decisions in that circumstance, and respected this. People we spoke with told us they were happy with the support they were given and that the registered manager always checked with them before undertaking any care.

Is the service caring?

Our findings

People we spoke with told us they liked and valued the care and support they received from the registered manager. They described the registered manager as "Quite amiable." They told us they had over time developed a good understanding with them and that the registered manager understood how they required support. The registered manager told us they developed this understanding through being involved in the delivery of care and getting to know people and chatting with them.

People felt able to contribute to the planning of their care. A person we spoke with told the registered manager always checked how they could further help the person so that they received help with as many things as possible. The person told us, "She [Registered manager] always asks me, 'What would like me to do?'" They told us the registered manager was always willing to support them and that they could speak with them and tell them what they needed help with.

People told us they were happy with their care and that their care was delivered in a sensitive way that took into account their individual circumstances. A person we spoke with described the registered manager as "lovely." The person told us they were supported with some of the tasks they could not manage for themselves but that they felt comfortable and relaxed seeking the help and support they needed. They told us they felt their dignity was maintained when they received care.

Is the service responsive?

Our findings

People we spoke with told us they were supported to discuss their care before their care package commenced. They told us, "We both spoke to her and my situation and what I needed help with." They told us they listed all of the things they needed help with and that the registered manager discussed with them how they preferred these tasks completed. One person told us over time their needs had changed and they needed help with more specific tasks to support their movement and mobility. They told us they were grateful for the support and had found the support invaluable.

We reviewed the care plan for one person and saw detailed information to guide the registered manager about people's care that included their preferences and guidance about the person and how they preferred to be contacted.

People we spoke with did not have any complaints. They shared with us that they felt comfortable speaking with the registered manager and discussing their care and this helped forge an understanding of their needs. The registered manager explained that they had not received any complaints. They had a policy in place to ensure the complaint was responded to appropriately. We reviewed their policy and saw there was a process in place for dealing with complaints.

Is the service well-led?

Our findings

People we spoke with were assured they could contact the registered manager to discuss their care and that they would receive a response. People were positive about their experience of care and felt the service was well run.

The registered manager told us they had supplemented their knowledge of their legal obligations by signing up to websites such as The Institute for Social Care Excellence and finding about current best practice. They told us they had used their knowledge of working within the NHS and ensured care documentation was completed correctly so that it was clear what people's needs were.

People we spoke with felt able to feedback to the registered manager what they thought about their care, and their expectations. They told us their care was constantly being reviewed and updated to reflect any day to day changes they wanted to make. People shared with us that their care was very much based on their being ongoing dialogue with the registered manager in order that they received care they were happy with.

The registered manager had a number of policies and procedures in place to support how they reviewed the quality and safety of the service. For example, an Equalities policy so that people received consistent care that supported their human rights and access to care. We saw also the registered manager had a system in place to remind them when actions needed to be completed for people. We saw that care plans had been reviewed and updated periodically and action taken documented.