Newfield View Supported Living Limited
Newfield View Supported Living

<table>
<thead>
<tr>
<th>Region:</th>
<th>Yorkshire &amp; Humberside</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location address:</td>
<td>8B Gleadless Avenue</td>
</tr>
<tr>
<td></td>
<td>Sheffield</td>
</tr>
<tr>
<td></td>
<td>South Yorkshire</td>
</tr>
<tr>
<td></td>
<td>S12 2QH</td>
</tr>
<tr>
<td>Type of service:</td>
<td>Domiciliary care service</td>
</tr>
<tr>
<td>Date of Publication:</td>
<td>July 2012</td>
</tr>
<tr>
<td>Overview of the service:</td>
<td>Newfield View Supported Living is registered to provide personal care to adults who need support to maintain independence. The service consists of six properties, all within the Gleadless area of Sheffield. Each property is a two or three bedroom house, in character with other properties in the area. The services main office is located alongside one of the properties.</td>
</tr>
</tbody>
</table>
Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Newfield View Supported Living was meeting all the essential standards of quality and safety inspected.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 6 June 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

We spoke with six people who were supported by Newfield View Supported Living. They told us that they liked living at their home, staff were always available and they gave them the help that they needed. Their comments included; "It is good here. I can choose what to do. I have my own life and staff just give me the bit of help I need." "The staff are always respectful. I need some help sometimes and the staff know what help I need." "We share all the jobs between the people that live here. Staff are around if we need help." People told us that they had no worries or concerns. They said that staff knew them well and helped them maintain independence. People spoken with said that they could talk to staff if they had any worries, and that they were happy living at their home.

What we found about the standards we reviewed and how well Newfield View Supported Living was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

People can express their views and their dignity is promoted. The provider was meeting this standard.

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this standard.
Outcome 07: People should be protected from abuse and staff should respect their human rights

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. The provider was meeting this standard.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Staff received appropriate training and appraisal for their support and development. The provider was meeting this standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

The provider had an effective system to regularly assess and monitor the quality of service that people receive. The provider was meeting this standard.

Other information

Please see previous reports for more information about previous reviews.
What we found for each essential standard of quality and safety we reviewed
The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

More information about each of the outcomes can be found in the Guidance about compliance: Essential standards of quality and safety
Outcome 01: Respecting and involving people who use services

What the outcome says
This is what people who use services should expect.

People who use services:
* Understand the care, treatment and support choices available to them.
* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
* Have their privacy, dignity and independence respected.
* Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement
The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us
People told us that they were happy living at their home and that staff always asked their opinions. They told us "It's good here." "The staff are good." "I can talk to any staff and feel listened to." "We have meetings where we decide things together and sort out what we want to do." We also spoke with one relative who was visiting the home and they confirmed that they were satisfied with the support provided. They told us "I have no worries or concerns about the home." We observed that staff had good rapport with people, and provided encouragement and support in people's decision making. We found there was good communication, as staff were observed asking people their choices and checking that they were okay. Staff were seen to support people's choices and prompted and advised so that independence and choice was maintained.

Staff treated people in a kind manner and spoke with them respectfully.

Other evidence
We spoke with four support staff. They told us that they had received training on privacy and dignity. They were able to describe how they maintained people's privacy and dignity and how important this was for people. Staff were clear of the actions to take to make sure people were respected. Staff spoken with could give examples of how individual choices were provided throughout each day. Staff were able to describe how
they respected people living at the home, examples included; calling people by the name they preferred, getting to know about the person, their likes and dislikes and listening to people and promoting independence by respecting people's choice.

The manager told us and we saw evidence in people's care files that 'Best Interest Meetings' were held to discuss and make decisions that would benefit people's lives. This meant that significant decisions that went beyond a person's daily routines were determined by the person themselves and other appropriate advocates.

One relative spoken with said that they found staff caring and respectful. They told us that they were always contacted by staff with any updates and were involved in decisions regarding their loved ones care.

We saw records of residents meetings which showed that people's views were obtained so that they could be involved in decision making.

Our judgement
People can express their views and their dignity is promoted. The provider was meeting this standard.
Outcome 04: 
Care and welfare of people who use services

What the outcome says
This is what people who use services should expect.

People who use services:
* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement
The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
People told us that they received good support that met their needs. They told us "The staff are great". "I think it is very good here." "I get what I need. I have no worries." People said that the staff knew them well and helped them in the way that they needed and preferred. Comments included; "The staff know what I like." "I can talk to staff and tell them." People told us that they chose how to spend their time and staff supported their independence. All of the people spoken with were involved in attending day centres or social groups. Their comments included; "I make all my own decisions, staff just help me a bit with things I can't do myself." "I am busy doing the things I want. Staff are around if I need any help but I can manage on my own." "I get the support I need to do what I want. I am very happy here."

One relative spoken with commented, "It is very good here, I am happy for (my relative) to live here. The staff are approachable and available for advice. It is a good little community."

Other evidence
We looked at two people's care files. They contained a good range of information that covered all aspects of the person's life. The files included plans of care that held information on occupation, lifestyle choices, personal safety, family and friends and life skills. The plans detailed the staff actions required to support people in the way they chose. They were based on people's involvement in decision making, and encouragement and prompting so that people's independence was promoted and maintained. The files also included details of any health care issues and contacts so...
that people's health could be monitored and maintained. The files included risk assessments so that all risks had been identified, along with the actions required to reduce risk whilst maintaining independence. The care plans and risk assessments had been regularly reviewed so that they contained up to date information. We saw that people had signed their plans to show that they had been involved in decision making and agreed with them.

We spoke with four support staff. They appeared to know people living at the home very well, and could describe the support people needed, and the actions required from them to ensure this support was given. They were clear that the support provided was based around promoting independence, one staff told us, "We don't do things for people, we do things to support them to do it themselves."

One relative spoken with said that they were a regular visitor. They told us they were happy with the support their loved one received and had no worries. Their comments included; "I have no worries at all. (My relative) is well looked after." "I am always made to feel welcome and can talk to staff." "The staff have been very good and always keep me informed."

People were seen to have choice about how to spend their time. All of the people spoken with were involved in some occupation, such as attending day centres and social groups. People told us that their lives were as busy as they wanted them. The said that there was always a member of staff around at their home if they needed them. People explained that they were responsible for most tasks themselves, and decided with the other people living in their home who would cook, shop, clean and complete other household tasks. People said that staff supported them to do this. Two people told us that they had 'one to one' time with staff so that they could go out into the local community and spend their leisure time as they chose. People said that they sometimes went out of the home on trips, and sometimes went to the local cinema or out for meals with staff.

**Our judgement**
People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this standard.
Outcome 07: Safeguarding people who use services from abuse

What the outcome says
This is what people who use services should expect.

People who use services:
* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement
The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
All of the people spoken with said that they felt safe in their home. They told us that they could talk to staff if they had any worries and were confident that staff would listen to them.

Other evidence
We were aware that in the last 12 months the service had one referral to the Local Authority Safeguarding Team. This had been fully investigated and brought out of safeguarding procedures. The manager was aware of safeguarding procedures and reported any incidents as necessary to ensure procedures were followed to make people safe. We saw that the service had safeguarding and whistle blowing policies in place and that they were working with the agreed South Yorkshire Safeguarding Protocols.

We spoke with four support workers. They were aware of adult safeguarding polices and procedures and what action they would take if they saw or suspected any abuse. We saw a training matrix that told us that support staff had received adult safeguarding training. The manager was trained to deliver safeguarding training and staff told us that they had all been provided with this. In addition, staff attended safeguarding training provided by the local authority to ensure they had full information to help keep people safe.

The support workers told us they had received training in the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DOL's).
Staff told us that they had access to people's monies, which were kept locked for safety. When people wanted their money they would sign this out, alongside the persons signature to evidence their agreement. People said that they always had access to their money and could spend it how they chose.

**Our judgement**

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. The provider was meeting this standard.
Outcome 14: Supporting staff

What the outcome says
This is what people who use services should expect.

People who use services:
* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement
The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us
We have no direct evidence from people using the service regarding this outcome.

Other evidence
We spoke with four support staff. They told us that they were up to date with all aspects of their training, and that refresher training was provided at regular intervals to maintain their skills and knowledge. They confirmed that they had undertaken training in all mandatory subjects, which included Moving and Handling, Fire, Safeguarding, Medication, Food Hygiene and Infection Control. They had also been provided with training in additional areas, such as Diabetes awareness, Equality and Diversity, and Dealing with Challenging Behaviour, to enhance their skills. Staff said that the training provided was "Very good." They said that if they felt they needed any extra training they could discuss this with the manager who would arrange it if she was able.

We looked at the staff training matrix. This showed that a training plan was in place to make sure staff skills were maintained.

Staff told us that they received regular supervision and an annual appraisal for their development and support. We looked at staff supervision records. This showed that the majority of staff received regular supervisions. However, the records showed that three staff had not received any supervision in 2012. Whilst these had been booked, they had not taken place as staff had been unable to attend for various reasons. The provider should note that systems for staff supervision would be improved if gaps were identified and acted upon in a timelier manner.
Staff told us that they had staff meetings for discussion and support. We saw records of these which showed that they took place on a regular basis.

All of the staff spoken with said that the manager was very approachable and supportive. They could go to her at any time to discuss issues or ideas. Staff spoken with felt that they got enough support for them to do their jobs.

**Our judgement**
Staff received appropriate training and appraisal for their support and development. The provider was meeting this standard.
Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says
This is what people who use services should expect.

People who use services:
* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

<table>
<thead>
<tr>
<th>Our judgement</th>
</tr>
</thead>
<tbody>
<tr>
<td>The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Our findings</th>
</tr>
</thead>
</table>

What people who use the service experienced and told us
We have no direct evidence from people using the service regarding this outcome. However, we gathered evidence of people’s experiences of the service by reviewing the ‘Customer Satisfaction Survey’ that was completed in January 2012. Results were positive and comments included; "A good team effort that is appreciated by the family." "Courteous and helpful in every way." "Very happy and contented."

Other evidence
The service manager had been in post for a number of years and was registered with us. She was a very experienced and skilled manager who showed that she was able to meet the services aims and objectives.

The manager confirmed that she had systems in place to audit the service provided. We saw that a quality audit had been carried out in January 2012. Questionnaires had been sent to people using the service, relatives, professional visitors and staff. The results of the surveys had been audited and a report had been compiled with the details of this. The manager confirmed that any interested party had access to the results of the survey. We saw that the results of the survey were generally very positive.

We saw that the manager undertook regular ‘Observation Visits’, which were recorded. These showed that regular checks took place which covered talking to people, checking records and the environment.

A complaints procedure was in place so that people could voice any concerns. People
had access to a ‘Grumbles book’, to record any concerns, but the grumbles book seen had no entries. All of the people spoken with said that they had no worries or concerns, but that they could talk to staff if they had. Everyone spoken with said that staff would listen to them.

**Our judgement**
The provider had an effective system to regularly assess and monitor the quality of service that people receive. The provider was meeting this standard.
What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called Guidance about compliance: Essential standards of quality and safety.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

**Compliance actions**: These are actions a provider must take so that they achieve compliance with the essential standards. We ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action**: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.