

# Inspection Report on

**Integra Community Living Options** 

INTEGRA COMMUNITY LIVING OPTIONS LTD
THE MALTINGS
EAST TYNDALL STREET
CARDIFF
CF24 5EA

**Date Inspection Completed** 

31/07/2019



#### **Description of the service**

Integra Community Living Options Ltd supports up to ten adults with mental health conditions. The service operates from an office in Cardiff. At the time of the inspection, the service provided was limited to a low number of people and we visited four people in a supported living accommodation (for which they hold their own tenancy).

The registered provider is Integra Community Living Options Ltd. Peter Max is the responsible individual (RI) providing strategic oversight, and a manager has been appointed who is registered with Social Care Wales.

### **Summary of our findings**

#### 1. Overall assessment

People appear to be happy with the support they receive from Integra, and they are recognised and respected for who they are. They thrive due to good support, continuity with the care workers and the service's commitment to achieve positive outcomes for them. Care workers promote people's rights, resilience and confidence. People and staff interactions are warm and positive, and staff know the needs and likes of the individuals well. People's physical, mental and social needs are recognised and supported. The support provided by the service enables people to develop their independence, domestic skills, and to enjoy community life. There are systems in place to help protect people from harm. Staff are well trained, feel valued, and there is a low staff turnover. Good organisational and governance arrangements ensure the service runs smoothly and delivers good quality support. An experienced and approachable manager leads this well run service and is supported by an experienced and pro-active RI.

#### 2. Improvements

As this was the first inspection since the service registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA 2016), any improvements will be considered as part of the next inspection.

#### 3. Requirements and recommendations

The service met all legal requirements and we had no recommendations to make.

#### 1. Well-being

#### **Our findings**

People's rights are promoted. We found that care workers encouraged people to take responsibility and to make decisions, and we saw that people had been involved in planning their support. People attended monthly meetings with staff to discuss their support, organise housekeeping, and discuss any issues they may have. People had access to written information about the service itself, and the advocacy services available. The service helped people to understand their safeguarding and advocacy rights, by regularly discussing those with individuals. This means that people have influence and control over their day-to-day lives and that they have support to understand their rights.

There are systems in place to protect people from abuse and neglect. The main entrance to the supported living accommodation was locked and had an appropriate system to notify tenants and care workers that admittance was required. People had keys for their own rooms. We were told that people understood the importance of the security measures put in place to help keep them safe. We found that staff and management understood their roles in protecting people and that they had received training and education to recognise signs of abuse and poor mental or physical health. Having been trained in applying the safeguarding principles and policy, they knew when and how to report relevant concerns. There were also risk assessments in place which identified people's particular vulnerabilities and the strategies for protecting them from harm. People confirmed that they felt safe in their home. We can conclude that people's safety and well-being is actively promoted.

Being supported by Integra has made a positive impact on people's health, independence and well-being outcomes. People were treated as individuals and supported to be more confident and independent, and they were supported with their goals and ambitions. Care workers anticipated people's emotional needs and supported them with respect and understanding. People's individual needs were set out within their personal plans and we found that support was adapted to suit their circumstances. People said "I don't want to be anywhere else", and "I like it here". When we visited, people looked comfortable in the company of staff and each other. We noted that staff interacted with people in a warm and caring but respectful manner. They were attentive and had a good awareness of people's needs and dignity. We saw people got on well with staff and were comfortable approaching them for help and advice. All staff had been working in the service for some time and this contributed to good continuity of care. We saw that people were encouraged and supported to maintain contact with their family and other significant people in their lives. We conclude that people are supported to be well.

People are supported to cope better with behaviours. We found the service was clear how it supports individuals with behaviours that may be detrimental to themselves or others. We found that this was bolstered by relevant staff training and policies. We saw that individuals had behavioural management plans, containing guidance for staff to identify and reduce potential challenging behaviours. Staff training and guidance were tailored to meet the needs of the current individuals. We saw examples that staff were pro-active and supported people to minimise potentially harmful behaviour. Daily occurrences, moods, incidents and behavioural patterns were recorded and evaluated to inform care and support. We conclude that the service has robust internal processes to support individuals in managing behaviours which may challenge themselves and/or other.

#### 2. Care and Support

#### **Our findings**

People receiving support from Integra get positive person centred support. We saw that people's needs were assessed before they came into the service to make sure the support was suitable for them and the service was able to support individuals to achieve their outcomes. We looked at two service user care files and saw evidence of robust care planning and timely reviews, and we also found documentation was detailed and up-to-date. Staff were given clear guidance within the plans, and the associated risk assessments, about to how to meet people's needs and maintain their safety. The plans showed people had been involved and had contributed their wishes and preferences. The files also contained 'pen pictures' and important details such as people's likes, dislikes, friends, etc. as well as in-depth information to give guidance about people's specific needs, and the support required. Appropriate risk assessments were in place, and strategies to support positive risk management were seen. The service carried out regular reviews with each person about their physical and mental well-being, activities and achievements. A well designed and person centred electronic template for daily notes provided a simple but effective way for staff to record important information for each individual. This was a useful method of identify change in, or concerns about, people's conditions and to see what worked positively for them. We conclude that people participate in their care planning and their care and support is well informed.

People are supported to stay well and their health is monitored. We saw in the care records that other health and social care professionals were involved with people's care, for example mental health team, general practitioner (GP), social worker and more, on a regular basis as well as when needed. Important health information, such as when medication was taken, was recorded regularly and reliably. We noted that the staff in the service promoted a healthier lifestyle in food and activity choices, and supported people to manage smoking safely. We also saw that people were encouraged to do daily activities, such as cooking, cleaning and washing clothes. This shows that people's health and well-being is promoted.

People's medication is safely supported. We saw that people administered their own medication, with the support of staff if required, which promotes their independence in this area. There were corresponding risk assessments for medication in their care plans. Staff also supported people with going to the pharmacy and renewing prescriptions. We noted that medication was appropriately checked and audited by management and that there were appropriate policies in place, thus contributing to safe practice. We noted secure arrangements for storing medications and supplements in people's rooms, in the form of a lockable box and room locks, which meant they were only accessible to those who required this. This shows the service minimises the risks associated with supporting the management of medication.

#### 3. Environment

#### **Our findings**

We do not currently consider the environment as part of our inspection remit for a domiciliary care service but noted that the office had appropriate security arrangements, training spaces, and rooms for private conversations. We found also that there was satisfactory storage for confidential files.

#### 4. Leadership and Management

#### **Our findings**

The service has suitable and satisfactory processes in place to ensure that staff are fit to work with vulnerable people. The staff files we saw evidenced robust recruitment and vetting. They were well organised and contained all the required checks and information. All staff had achieved appropriate care qualifications (and some were working towards higher levels). We found there was a comprehensive staff induction programme in place and all staff had undertaken mandatory and additional training in a variety of subjects including fire safety, GDPR, advocacy, recovery and goal planning, diabetes, professional boundaries, self- harm, epilepsy awareness, violence and aggression, lone working, substance abuse, food safety and first aid, positive behaviour management and more, with further training scheduled. Staff were positive about their training and said they felt competent and comfortable in their roles. Staff had regular supervision meetings with the manager and used the opportunity to reflect on their performance, receive support and discuss future goals and training. Formal and informal meetings with management kept staff up-to-date with changes and developments and provided a platform for discussion. The service had a clear management structure, with each staff member having a distinct role and responsibility. We noted that the manager received good support from senior management and peers, as well as supervision, and management meetings providing learning opportunities for managers and supported them to share ideas. All this indicated there was a culture of shared learning, reflection and development at the service. Staff commented positively to us about the leadership of the service, indicating they felt valued and supported. They said "it's a nice service to work for, and there is good rapport with the people", "I came only for a short time and now I am still working here many years later", and "we are a good team". We conclude that people benefit from a stable team with appropriate knowledge and skills.

Governance, auditing and quality assurance arrangements are in place to ensure the service runs smoothly and delivers good quality care. We sampled a selection of reports which included feedback from staff and people living in the service. The documents gave evidence of outcomes and informed conclusions and plans. We also looked at the reports of the required RI visits and found they were consistent and inclusive. The regulatory six-monthly quality of care review of the service to the provider was overdue but submitted shortly after the inspection. We saw robust internal quality assurance systems in place which helped the service to self-evaluate and improve. We found clear and current policies and arrangements for dealing with complaints, compliments, incidents, safeguarding and accidents. We spoke with staff about those and found them well informed about their roles. We noted that management acted in a timely and appropriate manner with any issues arising and were told that the service had not received any recent complaints. The administration of the service was very well organised and maintained, from the selection of policies, procedures and records we viewed as part of the inspection. Notifications were routinely forwarded to CIW, and appropriately actioned and recorded in line with regulations. We conclude that people benefit from a service which has an ongoing commitment to reflection and improvement.

The service provides good information. A comprehensive, up-to-date statement of purpose set out the service's aims, values, and how it intended to deliver the service to people. It also contained pertinent information about processes and policies such as for complaints or safeguarding issues. An easy-read service user guide was available for people and their representatives, containing practical

information in relation to the services provided. We conclude that people benefit from a service that is transparent with its values and purpose, and makes its objectives and provisions clear.	

## 5. Improvements required and recommended following this inspection

#### 5.1 Areas of non-compliance from previous inspections

This is the first inspection since the service was registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

#### 5.2 Recommendations for improvement

No areas of non-compliance were identified at this inspection, the service met all legal requirements. We had no recommendations to make.

#### 6. How we undertook this inspection

We undertook a full inspection, the first for the agency since re-registration under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

Information for this report was gathered from:

- an announced visit to the service on 31 July 2019 from 1020hrs to 1600hrs
- conversations with service users in their supported living accommodation
- conversations with the manager, office and care staff
- communications with the responsible individual including verbal feedback on 2/8/19
- observations of daily routines and activities in the house during the visit
- examination of two care files relating to people in the service
- examination of three staff files to consider recruitment, and the arrangements for supervision and training
- examination of records and policies held at the service such as accident/incident reporting, staff training and supervision matrix, privacy, safeguarding and other policies, complaints procedure etc.
- review of information about the service held by CIW
- review of the service's statement of purpose and service user guide
- review of the service's quality assurance system, RI visit reports, meeting minutes and other relevant reports
- feedback from four service user questionnaires.

We are committed to promoting and upholding the rights of people which use the care and support services. In undertaking this inspection we actively sought to uphold people's legal human rights.

https://careinspectorate.wales/sites/default/files/2018-04/180409humanrightsen.pdf

Further information about what we do can be found on our website: <a href="https://www.careinspectorate.wales">www.careinspectorate.wales</a>

## About the service

Type of care provided	Domiciliary Support Service
Service Provider	Integra Community Living Options Limited
Responsible Individual	Peter Max
Date of previous Care Inspectorate Wales inspection	15/11/2017
Dates of this Inspection visit(s)	31/07/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No
Additional Information:	

Date Published 27 August 2019