

Inspiring Aspirations Plus Ltd

Inspiring Aspirations Plus

Inspection report

New Skill Centre
The Drift, Nacton Road
Ipswich
IP3 9QR

Tel: 01473290276
Website: www.inspiringaspirations.org

Date of inspection visit:
14 September 2022
27 September 2022

Date of publication:
10 October 2022

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

Inspiring Aspirations Plus is a supported living service, providing care and support to autistic people and/or people with a learning disability living in their own homes. A supported living service is where people receive personal care and support to enable them to live as independently as possible.

At the time of our inspection Inspiring Aspirations Plus was providing a supported living service to four people. All four people lived in their own homes with no shared facilities and received 24-hour care and support.

CQC only inspects where people receive a regulated activity of personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked only at people's personal care and support.

Affiliated with the service was a community hub located near the office premises. This was known as the 'New Skills Centre' and provided a range of services to people. This included tailored activities, access to resources and assistance with daily living skills. We looked at this as part of the inspection.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

People's experience of using this service and what we found

The service demonstrated how they were meeting the underpinning principles of Right support, right care, right culture.

Right Support

We observed people were comfortable in the company of the staff who supported them; interactions were positive and meaningful. Staff understood how best to communicate with people, using body language, sounds and pictures to aid understanding where required. People were assisted by staff to manage their own health care needs. Staff worked proactively with other health and social care professionals to support people to achieve good outcomes and enjoy a person-centred quality of life.

People were encouraged and supported to be independent and to engage in tailored activities and pursue interests that were important to them. Staff spoke knowledgeably about how they ensured people received care that met their diverse needs, including protected characteristics. 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.

Right Care

People received responsive, person-centred care that met their individual needs. Staff observed people's privacy, dignity and confidentiality and treated them with respect. There were enough suitably trained, recruited and supervised staff to meet people's needs. Risks to people were regularly monitored and assessed and adapted where needed. Staff managed people's nutrition and hydration risks well, supporting them to choose healthy and balanced diets taking into consideration their likes, dislikes and preferences. Trained staff safely administered medicines to people.

Right Culture:

A person-centred and inclusive culture was evident in the service. Feedback from people, relatives and staff was actively sought and acted on. Staff worked well with each other and morale was good. Staff felt recognised and valued by the provider and management team. Complaints, concerns, accidents, incidents and safeguarding issues were appropriately reported, recorded and investigated. This included lessons learnt to mitigate risk and prevent reoccurrence. Effective governance frameworks were in place to underpin continual development of the service and ensure people received good quality of care.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 27 May 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 safe findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our safe findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our safe findings below.

Good ●

Inspiring Aspirations Plus

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by an inspector.

Service and service type

This service provides care and support to people living in 'supported living' settings, 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.

Registered Manager

This service is required to have a registered manager. The service had a manager registered with the Care Quality Commission. They were also the provider. This meant they were legally responsible for how the service is run and for the quality and safety of the care provided. The provider had day to day oversight of the service and was supported by a manager and an office team.

Notice of inspection

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 12 September 2022 when we gave notice and ended on 27 September 2022. We visited the location's office and two people's homes on 14 September 2022.

What we did before the inspection

We reviewed information we had received about the service and sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service; visiting two people in their own homes and one person in the community hub affiliated with the service about their experience of Inspiring Aspirations Plus. We got feedback from two relatives.

We spoke with the provider, a manager, two team leaders, a well-being and personal development officer and five support staff. We received electronic feedback from nine members of staff and five professionals involved with the service.

We reviewed a range of care records for three people. Where applicable this included care and support plans, risk assessments, healthcare information, medication records and positive behaviour support plans. We reviewed the recruitment records for three staff members. We also viewed some of the provider's policies and procedures, training data, quality assurance records, management monitoring and oversight records.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated 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 in the company of the staff that cared and supported them. We saw that people were comfortable and at ease with staff.
- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. There were policies covering adult safeguarding, which were accessible and understood by staff.
- Staff had received up-to-date safeguarding training appropriate to their roles. They understood the procedures they needed to follow to make sure people were safe and told us they would report any concerns to management or external agencies if needed.
- People's relatives and social care professionals told us people were safe. One relative told us, "They [staff] know how to balance risks, keeping [person] safe and protected, supporting them to live their life fully."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People's needs, and any associated risks were assessed, monitored, and regularly reviewed. Staff had a proactive approach in ensuring people maintained their independence where possible and managed their own risks.
- Care and risk management plans provided staff with the information they needed to support people in a safe manner.
- People's care records provided additional information about their health needs and how these should be managed and met. This helped staff to have a clear understanding of the impact of people's conditions and to make timely referrals when needed.
- Where accidents and incidents had occurred, these were regularly reviewed to identify any trends and actions to mitigate risk.
- Where required, care records were updated following an incident to help reduce the risk of reoccurrence. Changes to people's care and risk management plans were communicated to staff in a timely manner.

Staffing and recruitment

- There were sufficient staff deployed to keep people safe and for the level of support people required. This included one-to-one support for people to take part in activities and visits when they wanted.
- Staff knew how to take into account people's individual needs, wishes and goals. People had a consistent team of staff to support them which enabled continuity of care.
- Safe recruitment and induction training processes were in place. Appropriate recruitment checks had been carried out so suitable staff were employed.
- This included Disclosure and Barring Service (DBS) checks, which provide information including details

about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. References were also sought from previous employers.

Using medicines safely

- Staff made sure people received information about their medicines in a way they could understand.
- People were supported by staff who followed systems and processes to administer, record and store medicines safely.
- People's medicines were administered by staff who were trained to carry out the task and had their competency to do this safely was regularly checked by management.
- People had individual medication administration records to ensure they received their medication as prescribed. These were regularly audited.
- There were PRN protocols (as required) medicine guidelines in place, with personalised details of the signs the person may show, indicating when they needed those medicines.
- There were procedures that showed the service was working to achieve STOMP principles. STOMP stands for stopping over-medication of people with a learning disability, autism or both. The provider told us they worked with relevant professionals to ensure medicines were only used when necessary.

Preventing and controlling infection

- People were protected from the risks associated with poor infection control because the provider had processes in place to reduce the risk of infection and cross contamination.
- Staff used personal protective equipment (PPE) effectively and safely and had completed training in infection control prevention.
- The provider's infection prevention and control policy was up-to-date.

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.

This is the first inspection for this newly registered service. This key question has been rated 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's needs were assessed, before support plans and risk assessments were determined. People's agreed goals for care were delivered in line with recommended best practice guidance and current legislation.
- Care records were personalised and reflected how people wanted to be supported. They reflected people's diverse needs. For example, around people's heritage, beliefs, cultural requirements and lifestyle choices.
- People's care and support plans reflected current needs, promoted strategies to enhance independence, and demonstrated evidence of planning and consideration of the longer-term aspirations for each person.

Staff support: induction, training, skills and experience

- People and relatives told us staff were competent, knowledgeable and familiar with using specialist equipment where required which gave them reassurance. One relative shared, "The care is excellent and very professional. Staff are all well trained, reliable and hardworking."
- Staff received their required training, and had the necessary skills, to carry out their roles. A staff member shared, "The training is detailed and thorough. The induction is well structured, relevant to the job and what is expected of you. If you want to progress, there are opportunities to do this, but no pressure attached. It is a good company to work for, the management care about the staff and understand the importance of our wellbeing. Some days supporting people can be intense, especially if they are having a bad day or a 'dip' in their mood. It can have a big impact and be quite draining but the management understand that and will check in and support you."
- New staff received an induction which included training, assessed shadowing with more experienced colleagues and working on completing the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that form part of a robust induction programme.
- Staff were encouraged and supported to professionally develop through ongoing training, continual supervision, appraisal and recognition of good practice. Opportunities to achieve further qualifications in care were made available.

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People received appropriate support with eating and drinking in line with their cultural preferences and

beliefs. Staff helped people to manage their own diets and promoted independent planning and cooking.

- Staff encouraged people to eat a healthy and varied diet and where required supported people with weight management.
- The service worked in partnership with other professionals to ensure people's healthcare needs were understood and appropriate support was provided.
- People had health action plans (HAP) which were used by health and social care professionals to support them as needed. A HAP is a personal plan about what a person with learning disabilities can do to be healthy.
- People were supported to attend annual health checks, screening and primary care service appointments. Multi-disciplinary professionals were involved in or were made aware of support plans to improve people's care and treatment experience.
- Staff worked well with other services and professionals involved in people's care and support arrangements which supported their well-being. One professional told us, "The provider has always undertaken a thorough assessment, seeking consent and speaking to all involved in the person's life in order to formulate the best offer of support." They added the service, "Is always encouraging the individuals they support to progress towards their potential."

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 MCA 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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Staff empowered people to make their own decisions about their care and support. One person told us, "I choose what I want to do and they [staff] help me." Another person said, "They [staff] are good, they listen to me. I decide what I want to do in my life not them."
- Staff understood their responsibilities regarding the MCA and DoLS.
- People's support plans showed which decisions had been made in their best interests. Care records contained signed consent forms. Where people had been unable to consent to their care, best interest decisions had been made to provide support.
- Where required, staff ensured that an Independent Mental Capacity Advocate was available to support people if they lacked capacity to make a particular decision.

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.

This is the first inspection for this newly registered service. This key question has been rated 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 were friendly, supportive and caring towards them and we observed this during the inspection.
- Staff engaged well with people, their interactions were enabling and meaningful and people were calm and relaxed in the company of the staff. It was clear from people's body language and reactions such as smiling and laughing they enjoyed being with the staff and were at ease.
- Staff received equality and diversity training supporting them to treat people equally and fairly whilst recognising and respecting their individuality. Staff treated people as adults and did not talk down to them, they treated people respectfully and appropriately.
- People's protected characteristics in relation to their equality and diversity needs such as age, disability and religion were considered as part of the ongoing assessment and care planning process and reflected in their care records.

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

- People shared examples with us of the positive and enabling approach of the staff towards them. They told us how the staff encouraged and supported them to make decisions about their health, care and support arrangements. One person said, "It's my life, I choose what I want to do. Where I want to go and when to go. I want one day to not have support all the time, to be in charge, independent. They [staff] help me to make good choices."
- People were respected and equal partners in their care arrangements. They were involved as much as they wanted to be in shaping their goals and outcomes. One relative said, "The support staff are very caring and patient. They know [person] really well, having built up that trust and bond. There is a regular team in place to support [person]. It works really well, different personalities and friendships which [person] responds well to. The support staff explain things to [person] in a way [person] can understand and this helps [person] to live their life on their terms."
- Relatives and representatives acting on behalf of people where appropriate to do so confirmed they had been involved in ongoing care arrangements.

Respecting and promoting people's privacy, dignity and independence

- People told us the staff treated them with dignity, talking to them in a polite and respectful manner and their privacy was respected. This was in line with our observations during the inspection.
- People were given time to listen, process information and respond. Staff took the time to understand people's individual communication styles and develop a rapport with them.
- People were enabled to make choices for themselves and staff ensured they had the information they

needed. Staff supported people to maintain and increase their independence wherever possible.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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

- Assessments had been completed prior to people receiving care and support to ensure the service could meet people's needs. People's choices, likes and dislikes were reflected in their care records.
- People's care records contained meaningful information that identified people's abilities and the support required to maintain their independence. For example, one person had epilepsy and their care plan contained specific instructions outlining what the condition meant to them and how it affected them. This ensured the person received appropriate, personalised care.
- Relatives shared examples of how staff supported their family member when they were experiencing distress, expressing feelings or an emotional reaction that they could not always verbalise. They described how staff, were alert to changes in an individual's mood and responded quickly, using proactive strategies which calmed the situation and reassured the person.
- Where required, people had a specific behaviour support plan in place. This was an agreed protocol that provided key information to staff regarding a person's initial signs of distress, frustration and the actions to take to safely support them, mitigate risk and enable them to lead a more independent life.
- Professionals involved with the service were complementary about the staff and how they achieved positive outcomes for people. One professional commented, "The staff have remained open and honest, and ensure they apply a holistic approach to their support."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Each person's preferred method of communication was highlighted in their support plans, which enabled staff to communicate with people in the way people preferred and understood.
- People had communication passports. This enabled people to communicate their needs and access equality in mainstream health care services.

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

- People were supported to participate in their chosen social and leisure interests on a regular basis. There were photographs of people involved in various activities in their home and also in the community hub

affiliated with the service. People's individual achievements were celebrated.

- Staff empowered people to be active citizens and have equal rights in their local and wider community. A relative told us, "My [family member] is being helped to live as independently as possible but to remain safe while doing so. [Family member] has the most active social life of anyone I know. Whilst this is great, as it is important to be active and involved, it can become too much for [person] if there is no balance. They [staff] understand that, they can see it is all or nothing with [family member] and they step in where needed to avert any crisis."

Improving care quality in response to complaints or concerns

- A complaints policy and procedure were in place. Records showed where concerns and formal complaints had been received, they had been responded to in a timely manner with lessons learnt to prevent reoccurrence, in line with the provider's complaint procedures.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; Continuous learning and improving care

- The provider had nurtured a person-centred culture in the service, where staff treated people as individuals, upholding their rights and encouraging and enabling them to live their life as they wanted.
- People were supported by staff to have access to the appropriate care that they needed, in the right location, taking into account their personal choices and preferences. People's decisions were respected and acted on.
- There was an open and inclusive approach to the running of the service. Staff morale was good, they felt recognised and supported in their role by management and were free to express opinions.
- A member of staff said, "I can honestly say that as a 'young' company, Inspiring Aspirations Plus is a delight to work for and to be part of the family! The core strategy is to not only care and value [people that use the service], but to also care, appreciate and value the staff. A rare commodity these days in the care industry."

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

- People, relatives and staff voiced confidence in the leadership and direction of the service.
- Staff understood their roles, responsibilities and duties. Staff performance was monitored through one to one supervision and competency checks. Regular feedback underpinned professional development and well-being practices, and support was in place for staff.
- Effective quality assurance processes were in place. This gave the provider and management team an overview of the service, helping ensure people received safe, quality care and support. This included audits of various aspects of the service, such as medicines, health and safety and care records. Any issues identified were listed on the service's action plan, for the provider to monitor that they had been rectified.
- The service had notified CQC of significant events and incidents, in line with their legal requirements and responsibilities as a regulated service provider.
- The provider and management team were aware of the duty of candour and their responsibilities to be open and honest with people and their relatives in the event of something going wrong or a near miss.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People told us that they were equal partners in their care and the provider and management team were

accessible and helpful.

- Relatives confirmed they were asked for their views on the quality of the service being delivered and their feedback was acted on. One relative shared how they felt they were, "Listened to, fully involved and part of the process."
- The service worked collaboratively with the local authority and other health and social care services to achieve positive outcomes for people using the service.
- Feedback from professionals was positive. One told us, "The staff I have interacted with, know those they support very well and have a good rapport with them." Another professional shared "I can confidently say that Inspiring Aspirations Plus has been one of the most proactive and engaging support providers I have worked with."