

Options Autism (2) Limited

Options Autism Outreach Support Service - North

Inspection report

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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

This unannounced inspection was carried out on 8 November 2018.

At the last inspection which took place on 27 May 2016, the service was rated Good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

This service provides personal care to people living in their own homes and flats. It also provides support for 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 for supported living; this inspection looked at people's care and support.

At the time of the inspection, a total of 15 people were receiving care and support from the service, four of these people received support with personal care. We were unable to speak to the majority of people who used the service as they were attending other care provision or accessing their social activities. People who received support from the service had limited time allocated to do this, so chose not to speak with us during the inspection and access their planned activities. During the inspection we spoke with one person who was visiting the office.

People continued to feel safe and were protected from abuse because staff understood how to keep them safe, staff were able to discuss the processes they should follow if an allegation of abuse was made. All staff informed us concerns would be followed up if they were raised. People received their medicines safely as prescribed.

There were enough suitable trained staff to meet people's needs. Risk assessments were carried out to enable people to retain their independence and receive safe care.

Relatives and professionals told us, staff were extremely compassionate, kind and caring and had developed good relationships with people using the service. Staff knew people well and promoted their dignity and respected their privacy.

Care plans detailed and provided staff with guidance on how to meet people's individual needs.

People were supported to eat and drink according to their likes and dislikes. People who lacked capacity had decisions made in line with current legislation. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

The service had an open culture which encouraged communication and learning. People, relatives and staff were encouraged to provide feedback about the service and it was used to drive improvement. People were supported to engage in their preferred activity programmes. People knew how to complain and there were a range of opportunities for them to raise concerns with the registered manager and designated staff.

Staff continued to support people to book and attend appointments with healthcare professionals, and supported them to maintain a healthy lifestyle. The service worked with other organisations to ensure that people received coordinated and person-centred care and support. There were policies in place that ensured people would be listened to and treated fairly if they complained about the service. Quality monitoring was carried out to identify any shortfalls within the service and how the service could improve.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

Further information is in the detailed findings below.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Options Autism Outreach Support Service - North

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.

A comprehensive inspection took place on 8 November 2018 and was announced. The inspection was carried out by an adult social care inspector.

We used the information the provider sent us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

Prior to the inspection we reviewed information we held about the service and requested feedback from other stakeholders. These included the local Healthwatch, the local authority safeguarding team and local authority commissioning and contracts department. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

On the day of the inspection fifteen people were using the service, four of these people received personal care. We spoke with the registered manager, who is also the registered manager for a residential service, the team leader, the training manager, four care staff and one person using the service who was visiting the office.

We looked at two people's care plans and reviewed medication administration records. The recruitment records, supervision, appraisal and training documents for four staff members were also looked at. We reviewed documents and records that related to the management of the service. This included audits, maintenance records, risk assessments and policies and procedures.

Is the service safe?

Our findings

At our last inspection in May 2016, we rated this key question 'Good'. At this inspection the service remained 'Good'.

People using the service told us they felt safe and staff supported them to keep safe when they accessed activities and the local community. One person told us, "I love all of the staff, they help me to keep safe and they help me to sort out any problems I might have."

Systems continued to ensure safeguarding incidents were addressed. Staff were trained in this area and had a positive understanding of their responsibilities to keep people safe.

Risk assessments provided appropriate guidance for staff to minimise and manage risks and keep people safe. Care files contained risk assessments for all areas where a need had been identified.

Accidents and incidents were recorded and reviewed by the registered manager and senior management team to identify any emerging trends that may need further scrutiny.

Medicines were managed safely at the last inspection and continued to be so. A check of records confirmed people continued to receive their medicines as prescribed.

We looked at how the service was staffed and found appropriate arrangements remained in place. People supported in the community and in supported houses by the service received rotas informing them of staff that would be supporting them. Staff told us they felt people were staffed well to ensure they received appropriate support and were kept safe. One relative told us, "My son is extremely well cared for at home. All the carers take time to understand him and his complex issues."

The management team had the same good systems for recruiting staff in place from the previous inspection. Four recently recruited staff records we looked at confirmed this.

Staff told us they received training in infection prevention and control and they had access to sufficient personal protective equipment, such as disposable gloves and aprons to maintain good standards of infection control. Records confirmed staff had received this training and continued to receive regular updates.

A robust business continuity plan was in place to ensure people were safe in the event of fire or other utilities breakdown such as a power failure. There were systems in place to ensure the safety of the premises, including regular servicing of equipment.

Is the service effective?

Our findings

At our last inspection in May 2016, we rated this key question 'Good'. At this inspection the service remained 'Good'.

People received a high level of effective care and support based on current best practice for people with autism. The service was accredited by the National Autistic Society and employed a behaviour specialist in autism to train staff and participated in a wide variety of forums to exchange information and share best practice.

Professionals and a relative we spoke with told us the service 'went over and above' supporting people in a sensitive and professional way. They gave us examples of how staff had met people and developed relationships with them prior to supporting them. They told us the service made every effort to assist people to be involved in and understand decisions about their care and support.

The registered manager and professionals told us how the staff team worked effectively with people to promote their personal growth and independence. They gave examples of people being supported following bereavement, going on holiday for the first time and securing voluntary work.

Strong links with health professionals were maintained and ensured people received effective healthcare and annual health checks. Professionals told us, "Options work collaboratively with learning disability nurses and health professionals to support clients to maintain good mental and general health."

Throughout the inspection we saw information was available in a variety of formats for people, including the use of pictorial documents. Communication plans were found to be person centred and guided staff in how each person communicated and detailed their role in promoting effective communication. Professionals told us, "Staff are calm and have time to spend with people ensuring that their choices are supported and their voices are heard."

Staff promoted people's nutritional requirements. Care plans seen confirmed people's dietary needs had been assessed and support and guidance recorded. Staff informed us they had completed food and hygiene training to ensure they were confident with meal preparation.

We looked at how the service gained people's consent to care and treatment in line with the Mental Capacity Act (MCA). We saw written consent to care recorded in people's care records. The Deprivation of Liberty Safeguards (DoLS) do not currently apply in settings such as domiciliary care where people are resident in their own homes. However, the management team were aware of (DoLS) for people living in supported housing.

Staff continued to be provided with a comprehensive induction and a range of training to give them the skills and knowledge to provide people's support. Staff told us, "Our training is very good and we have regular updates as well as having the opportunity for development." Further service specific training

continued to be provided in least restrictive practice interventions and behaviour management strategies. These included autism specific training and protecting rights in a caring environment (PRICE), which was British Institute for Learning Disabilities (BILD) accredited.

Staff continued to be supported to receive regular supervision and appraisal and attended regular staff meetings and provided with handovers where they were updated on people's care and support needs.

Is the service caring?

Our findings

At our last inspection in May 2016, we rated this key question 'Good'. At this inspection the service remained 'Good'.

Professionals and a relative told us, they observed staff were professional, kind and caring in their approach and their interactions with people.

Staff spoke about people with compassion and affection. It was clear they had built trusting relationships and knew people well. When they discussed people with us they were not only respectful and knowledgeable, staff were passionate and clearly very fond of people. Comments from staff included, "It's is so rewarding, each day brings something new. This morning I have visited one person who in the earlier days was reluctant to accept support, we have built up a really good relationship with them and this morning they had written me a Christmas card. This gesture really touched me and reminds me of how far they have come." Others told us, "I love my job, no two days are the same and supporting people to achieve their independence and aspirations amazing, we celebrate their achievements with them."

Staff told us how people were involved in discussing their care and support needs, records seen confirmed this process. A relative told us, "Although my family member is unable to communicate verbally, The staff take time to 'listen' to them, which makes them (family member) very happy. I can't fault them."

Staff were mindful of respecting people's privacy and dignity. Staff told us, "We need to consider people's wishes at all times. We are going into their homes and need to be mindful of this at all times. Some people don't want us there so we work with them introducing ourselves, building up relationships, they lead the way and we follow their wishes, one person is now letting us into their kitchen which is a massive achievement. Previously we had to speak with them in the garden."

Staff understood it is a person's human right to be treated with respect and dignity and to be able to express their views. We observed them putting this into practice during the inspection. One person we spoke with told us their views were respected and explained only female staff worked with them at their request.

People's confidentiality was respected and personal information was appropriately stored. Staff were aware of issues of confidentiality. Staff told us information is shared on a "need to know basis." One member of staff said, "Everyone has the right to privacy."

Professionals and a relative told us people were well cared for, that staff displayed an in depth knowledge of the individuals they supported and were keen to get the best outcomes for people.

Personalised programmes and flexible staffing arrangements supported people's independence. The registered manager and staff told us how one person who had been referred to them with an ongoing health condition had been supported to develop their relationship with health professionals to ensure their condition could be treated successfully, resulting in them enjoying a better quality of life and more

independence. Records seen confirmed the process and support provided by staff to support the person.

Is the service responsive?

Our findings

At our last inspection in May 2016, we rated this key question 'Good'. At this inspection the service remained 'Good'.

Professionals and a relative told us staff were responsive to their wishes. They said people were supported and listened to, to enable them to make choices about their life including the activities they followed within their home and in the local community. They told us, "The individual I support is encouraged daily to be independent. They encourage them to access the community to complete tenancy related tasks and to make positive choices about their week. They have also been supported to go on holiday as this was their choice and one that previous support providers had been able to do."

Care plans were reviewed regularly to ensure that information remained current and provided up to date information for the staff team.

The registered manager was aware of the Accessible Information Standard and care plans contained information about the person's preferred method of communication. Details of whether the person could communicate their needs around requiring assistance or making decisions was also included.

The Accessible Information Standard came into force in 2016 with the aim of ensuring people with disabilities, impairments or sensory loss get information they are able to understand, plus any communication support they need when receiving healthcare services.

Although people using the service were not approaching the end of their life, staff had a good understanding of what care and support people might need when this time came and any particular expressed preferences were recorded.

The provider continued to have a procedure for receiving and responding to complaints about the service although no complaints had been received since our last inspection. Copies of this was available in an easy to read format within the service. Staff spoken with were fully aware of their responsibilities in dealing with complaints and bringing this information to the attention of senior staff and the registered manager.

People knew who they could talk to if they were unhappy. One person using the service and a relative told us they could speak to the registered manager or staff about anything. One person told us, "I'd tell the boss", pointing to the registered manager. A relative confirmed they knew how to raise any concerns should the need arise. Staff we spoke with told us they would be confident supporting people if they wished to raise a complaint.

Since the last inspection staff had continued to respond well to people's behavioural needs and care plans were based on a positive, proactive approach and best practice guidance. Professionals told us, "Options provide specialised support. They strive to meet the complex needs of people to whom they provide support. I feel that this service is invaluable in meeting those complex needs. The service not only meets the practical needs of the people with whom they work, but also meets the emotional and psychological needs

of the individuals."

Is the service well-led?

Our findings

At our last inspection in May 2016, we rated this key question 'Good'. At this inspection the service remains 'Good'.

There was a registered manager in place. 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.

Professionals told us they had developed positive professional relationships with the registered manager and staff. One professional told us, "I have spoken with people and their representatives and have had positive feedback from all. The management are professional, person centred and approachable and keen to work to resolve any issues in a prompt and timely manner and to get the best outcomes for those to whom they provide services."

Staff told us the manager was approachable and ensured the staff teams best interests, and well being was always considered. This meant staff had adequate time to travel between calls, were encouraged to take their breaks and provided with time to complete their records. Staff visited the office regularly throughout the day and their location was monitored to ensure their personal safety.

A relative told us they spoke regularly with the registered manager and team leader and were asked for their feedback about the service their relative was receiving. The registered manager was committed to providing a high-quality service to people. We saw the registered manager and staff within the service carried out checks of the service to monitor good standards were being maintained. Further feedback was obtained through individual discussion with people using the service, relatives and professionals and staff meetings.

The registered manager and staff in the service continued to work with local health and social care agencies to ensure people continued to receive the support they required as their needs changed.

Registered providers of health and social care services are required by law to notify us of significant events that happen in their services such as allegations of abuse and authorisations to deprive people of their liberty. The registered manager ensured all notifications of significant events had been provided to us in a timely way.

Following the inspection the registered manager's deputy shared a newspaper article with us from the 'Lifetime Achiever Award at the Autism Hero Awards 2018', where the registered manager had received this award in recognition for their passion about empowering people with learning difficulties and additional needs to achieve their potential, sharing her knowledge and skills with the local community to spread understanding and promote inclusion. The nomination had been made by staff who had highlighted that she "continues to make measurable differences to those with autism, she is a passionate advocate for those with autism and works determinedly to ensure that everyone is living their best life".

