

West Northamptonshire Council

Reablement West

Inspection report

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16 September 2022

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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

About the service

Reablement West service provides care and support for people who need immediate support to live independently in their own home; this may be as a result of a crisis or illness or following a discharge from hospital. They provide short term support for people to regain independence or identify if people require a permanent care provider to meet their longer-term care needs. At the time of the inspection the service was supporting 41 people.

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

People were cared for safely. Risk's to people's health were assessed to reduce any risks identified. Safe recruitment practices were in place and staff understood their responsibilities to keep people safe from harm or abuse. People received their medicines safely and there were effective practices in place to protect people from infection.

Needs were assessed prior to people receiving support and their independence was promoted. Staff were skilled and received the training they required to fulfil their roles. They received regular supervision to develop their roles. People were supported with their meals and to maintain a balanced diet where needed. Referrals were made to health professionals and the service liaised closely with other social care and health professionals.

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 providers policies and systems supported this practice.

Staff were empathetic, kind, caring and respectful. Care was provided in a dignified and respectful way. People and their relatives were listened to and were able to make decisions about the care and support they needed.

People received person-centred care. People were able to make choices about the way they wanted their care to be provided and encouraged to do things for themselves to remain as independent as possible.

A complaints policy and procedure was in place so any complaints could be dealt with appropriately. People felt able to raise concerns with staff and management if needed. The registered manager had a good understanding of the regulatory requirements of their role.

Relatives of people told us they felt the service was well managed, and communication was good. Systems were in place to monitor and check on all areas of the service.

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

The last rating for the service under the previous provider was Good, published on 8 May 2019.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Reablement West

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.

Inspection team

The inspection team consisted of one inspector and an Expert-by-Experience. An Expert by-Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

Inspection activity started on 12 September 2022 and ended on 16 September 2022. We visited the location's office on 12 September 2022.

What we did before the inspection

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 eight people who used the service and four relatives about their experience of the care provided. We spoke with 11 members of staff including home carers, reablement support workers, schedulers, team leader, service manager and registered manager.

We reviewed a range of records. This included three people's care records and three staff files in relation to recruitment. We also reviewed a range of records relating to the management of the service including policy and procedures, quality assurance and staff supervision.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- People told us they were happy with the staff who came to support them; however, they would like more consistency as to who came to support them. The registered manager told us changes were being made to address this so that people would have a consistent team of staff supporting them.
- There were enough suitably qualified, experienced and skilled staff to provide people with safe care and support.
- People were safeguarded against the risk of being supported by unsuitable staff because there were appropriate recruitment practices in place. Staff were checked for any criminal convictions and satisfactory employment references were obtained before they started to work for the service.

Systems and processes to safeguard people from the risk of abuse

- People were cared for safely and were protected from the risk of harm. Staff knew what signs to look for to keep people safe from harm or abuse and there were up to date procedures and information available to support them. One staff member said, "If I have any concerns I would speak with my supervisor, team leader or the registered manager."
- People told us they felt safe with the staff who supported them.
- The registered manager understood their responsibilities to keep people safe and knew to notify the relevant authorities if any safeguarding issues arose.

Assessing risk, safety monitoring and management

- People told us staff understood how to provide them with safe care. One relative said, "The staff have been good at suggesting what we need to do to ensure [relative] is secure when on their own." The person said, "I am pleased with the suggestion and keen to get things sorted so I will feel safer when on my own."
- Assessment of risk to people's care had been undertaken and plans were in place to guide staff how to mitigate the risk identified.
- Fire and health and safety checks were in place which ensured people and staff were safe in the home environment.

Using medicines safely

- People's medicines were managed safely. Staff received training in administration of medicines and checks were in place to ensure medicines were being administered as prescribed.
- People's ability to manage their own medicines had been assessed. Guidance for staff was in place to support people safely should they need it.
- People were happy with the support they received. One relative told us if the staff had not taken the time

to check her loved one's medicines, they may have not been taking the right dosage of medicine prescribed.

Preventing and controlling infection

- People were protected from the spread of infection. The service had effective infection prevention and control measures to keep people safe.
- People told us staff wore personal protective equipment (PPE) when they visited. One person said, "They [Staff] wear gloves, masks and aprons when they come and dispose of them when they leave. They don't leave any mess around."
- Staff followed current government guidance when using PPE.

Learning lessons when things go wrong

- Lessons were learnt and shared with staff when things went wrong. For example, following a missed care visit all staff now need to ensure they record the date and who they spoke with if a person wishes to cancel a call.
- Risk assessments around self-neglect and audits have been put in place following a safeguarding incident.

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.

At our last inspection we rated this key question Good. The rating for this key question has remained 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 prior to returning home from the hospital and this continued as they arrived home. One person said, "Someone came and got me from the hospital. Once I was home, they encouraged me to walk to the toilet and back again and tried to get me to do other things to see what I was able to do for myself."
- Relatives were happy with the support people were given. One relative said, "[Loved one] was assessed by the team and I have had a lot of telephone conversations with the team and feel communication has been very good."
- Care records showed people's needs and choices were continually reviewed. This ensured their care and support was provided in line with the principles of best practice and promoting independence.

Staff support: induction, training, skills and experience

- Staff told us they were up to date with their training. One said, "We do a lot of training and regularly get messages to remind us of any training we are due." Another said, "The training is good."
- Staff competencies were tested, and a training matrix was in place which assured the registered manager and provider had oversight of all staff training.
- New staff completed an induction which included working alongside more experienced staff before they worked independently. One staff member said they had completed the Care Certificate. The Care Certificate is an agreed set of standards that defined the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the minimum 15 standards that should form part of a robust induction programme.

Supporting people to eat and drink enough to maintain a balanced diet

- People were encouraged to prepare meals for themselves as part of their reablement plan. Staff supported people when necessary. Some people had family members providing meals for them.
- Staff ensured they had sufficient time to support people with their meals, so people were not rushed. One staff member said, "I inform the office about the schedule and see more time is scheduled if I see a person needs more time to finish their meal."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The Reablement West Team worked closely with other health and social care professionals to ensure people got the support they needed to reach their goals.
- People had access to therapists including Occupational Therapists and Physiotherapists.

- One relative said, "They [Staff] have been very good, when I could not get hold of the GP one of them went down to the surgery for me."
- Relatives were supported to access information and other community services, to look at the longer-term support people may need to remain as independent as possible in their own homes.

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

- People's consent was sought before any support was given. People told us staff always sought their consent and asked them how best to support them.
- People's care records contained signed consent forms, and when appropriate, people and their relatives were involved in any decisions about the support they needed.
- People were encouraged to remain as independent as possible.

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.

At our last inspection we rated this key question Good. The rating for this key question has remained 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 they were treated with respect and the support they received met their individual needs. One person said, "I have found them [staff] to be very accommodating. They have been very good at making me feel comfortable about it all and give a very personal service."
- Staff met people's equality and diversity needs. These were identified in people's support plans, so staff knew how to respect people's preferences.

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

- People were involved in their own care and making decisions if they were able to. One person said, "They [staff] ask me what I need and how best to assist me."
- Relatives told us they were involved in the care planning and were kept informed and consulted with about any changes. One relative said, "We have had lots of conversations about [relative's] care, communication with the team is very good."

Respecting and promoting people's privacy, dignity and independence

- People's independence was promoted. The assessment process focussed on what people could do for themselves. One person said, "They [staff] ring me before they come to give me time to start to get up myself and then they help me if I need them to."
- People told us their privacy and dignity were respected. One person told us how uncomfortable and embarrassed they first felt needing support with personal care. They said the staff were very good at putting them at ease and they felt their dignity was maintained.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question Good. The rating for this key question has remained 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; 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

- Care plans contained clear guidance for staff on how to support the person with their individual goals and targets. They were person centred and focussed on enabling people to remain as independent as possible.
- People were actively involved in their care and had discussed their preferences with staff. For example, one person said, " They [staff] will come a little later when they know I have to go out first."
- People were informed about local resources in their area to enable them not to be socially isolated.

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.

- The registered manager was aware of this requirement and was able to provide documentation in different formats if and when required.

Improving care quality in response to complaints or concerns

- There was information available to people if they wished to raise a complaint or a concern. One person said, "There is a number at the front of the folder for me to ring if I have any concerns."
- There was an up to date Complaints Procedure in place and we saw when complaints had been raised, they had been responded to appropriately and within the timescale set out in the procedure.
- Lessons were learnt, and action taken to address any shortfalls in the service.

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.

At our last inspection we rated this key question Good. The rating for this key question has remained 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

- People were at the heart of everything the service did. Staff were focussed on providing support to enable people to meet their desired goals and empower them to live as independently as possible.
- The provider and registered manager had spent time to develop the service, so it focussed on reenabling people and meeting people's individual needs. A new structure and approach to delivery of the service was about to be introduced at the time of the inspection.
- People told us they felt supported and cared for. One person said, "I have found the reablement team to be very efficient. It's working well for me and I have no complaints, they have all been friendly, no trouble at all and they have tried and are trying very hard to get me moving again."
- Meetings with staff were held regularly which enabled them to share concerns, best practice and remain up to date with guidance

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

- The provider understood their responsibility under the duty of candour. The duty of candour requires providers to be open and honest with people when things go wrong with their care, giving people support and truthful information.
- The registered manager understood information sharing requirements, and knew when concerns had been identified, appropriate notifications should be sent to the CQC and the local authority as required by law.
- Staff told us there was information available about how to whistle-blow. This ensured they knew how to raise concerns with the local authority and the CQC if they felt they were not being listened to or their concerns were not acted upon.

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

- There were systems in place to monitor the quality and performance of the service. Audits of records were in place and action taken following any shortfalls found. We saw that 'drop in' sessions for staff had been set up to address any concerns around medicine administration following gaps in recording being found.
- Staff were clear about their roles and responsibilities towards the people they supported and felt supported in their role. They had regular supervisions, which ensured they provided the care and support at the standards required. One staff member said, "We usually have supervisions once a month and

supervisors come out and do spot checks on us. Communication is good."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People and families told us they were fully engaged and involved in their own service. As the service was for a short period of time people were given daily feedback on their progress.
- Care plans demonstrated people's equality characteristics were considered and respected.
- There was a survey for people to complete once the service was due to stop. This provided the registered manager with information as to how the service had been received and what improvements could be made.
- In response to feedback about providing more consistent support the provider and registered manager had developed a new working pattern approach which meant people would have the same staff. This was due to start following the inspection. Staff and people welcomed this change.

Working in partnership with others

- The Reablement West Team worked closely with other health and social care professionals to ensure people received the support and care they needed, both in the short and long term.
- The service had developed roles within the hospital setting so that people had a person to link with from admission to discharge, preventing unnecessary stays in hospital.