

RT Staffing Ltd

Steps Support

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

About the service

Steps Support is a domiciliary care service providing personal care to people living in their own homes. The service supports a range of people, including people who have a learning disability or autism, and people with physical disabilities. At the time of our inspection the service supported three people with personal care. Not everyone who used the service received personal care. CQC only inspects where people receive 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 experience of using this service and what we found

People were safeguarded from the risks of abuse by staff who understood their safeguarding responsibilities and knew how to raise concerns. Safeguarding policies and procedures were in place.

COVID-19 protocols and risk assessments were in place and staff received appropriate training and ample PPE. Where risk assessments needed to be more person-centred the provider acted promptly.

We have made a recommendation about risk assessments.

People's relatives spoke highly of staff, as did external professionals who had worked with them.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right Support, Right Care, Right Culture.

Right support:

- The care and support in place maximised people's choice, control and independence.

Right care:

- Support was person-centred support, appropriate and inclusive.

Right culture:

- The ethos, values, attitudes and behaviours of leaders and care staff supported people to lead inclusive and empowered lives.

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.

Relatives told us staff were caring, kind, and often went out of their way to ensure people felt safe and supported. People and their relatives were fully involved in the care planning and review process.

There was a positive culture at the service; staff supported each other when there were unexpected absences and the provider had not had to use agency staff. Staff felt involved in the running of the service and their opinions valued.

There were systems in place to assess, monitor and improve the quality of care being provided. Where these could be improved to focus more on ensuring good practice was in place, the registered managers were responsive to feedback.

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 9 August 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on our approach to inspecting newly registered services.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

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.

Steps Support

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 Care Act 2014.

Inspection team

One inspector carried out this inspection.

Service and service type

This service provides care and support to people living in their own homes.

The service had two managers registered with the Care Quality Commission. 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.

Notice of inspection

We gave the provider 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager(s) would be in the office to support the inspection.

What we did before the inspection

We reviewed information we held about the service, including the notifications we had received from the provider. Notifications are changes, events or incidents the provider is legally obliged to send us within required timescales. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We sought feedback from the local authority and a range of professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with three relatives about their experience of the care provided. We reviewed a range of records. This included three people's care records. We spoke with both registered managers.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We contacted 11 staff and seven health and social care professionals. We reviewed training information, policies, surveys, newsletters, and quality assurance 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 for 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

- The service had systems in place to safeguard people from the risk of abuse. The registered manager played an active part in ensuring people were safe and staff understood their safeguarding responsibilities. Suitable out of hours support was in place for people and staff.
- People felt safe. They consistently told us the high levels of continuity contributed to them feeling protected from any risks. One relative said, "I have no concerns and they give us complete peace of mind."
- Staff demonstrated a good knowledge of risks and associated actions in place. We identified two examples of risk assessments that were too generic and needed improvements to be more person-centred. The registered managers addressed these during the inspection.

We recommend the provider reviews all risk assessments to ensure they are suitably person-centred and detailed.

Staffing and recruitment

- The provider had appropriate systems in place to ensure staffing levels met people's needs. This included dependency assessments for people and well-planned rotas. Staff worked flexibly as a team to ensure people did not receive support from agency staff. One relative told us, "It's always the same people and if there is a change, we get plenty of notice. If they employ someone new they take their time shadowing and get to know us."
- Staff were safely recruited via a range of pre-employment checks in place, including DBS, references, and motor insurance where relevant. This reduced the risks of unsuitable people working with vulnerable people.

Using medicines safely

- Medicines were administered safely by staff who had received appropriate training and competency checks.
- Qualified staff undertook weekly audits and the registered managers completed monthly audits to identify errors and areas where improvements could be made.
- People received their medicines as prescribed. Where 'when required' medicines were prescribed, the medication policy set out how this should be recorded, in line with good practice. We found one instance of this not being recorded properly and the registered managers responded immediately to improve documentation, ensuring that each person with 'when required' medication had specific and detailed protocols in place.

Preventing and controlling infection

- Staff were supported through appropriate training and ongoing sharing of current guidance. There had been no shortages of PPE due to diligent planning. Relatives told us they felt reassured about the service's response to the COVID-19 pandemic. People had been supported to remain well informed regarding the pandemic and to help keep themselves safe.

Learning lessons when things go wrong

- The registered managers reviewed specific incidents and accidents to establish if lessons could be learned. These incidents were few and unrelated but the provider was able to demonstrate how they regularly reflected with staff about what, if any, lessons could be learned since the previous staff meeting.
- The culture was an open one in which staff felt supported to raise concerns, confident they would be dealt with as a learning exercise. One said, "Given the in-depth safeguarding training and the openness of the company I would feel very confident and supported raising any concerns."

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

- The registered managers worked closely with people, relatives and external professionals to understand people's needs and put in place effective care plans. Relatives gave positive feedback about their experiences of the assessment process, and how at ease people had been made to feel.
- People's needs and choices were sought and respected when planning care teams and delivery. Health action plans and communication information were in place.
- The registered managers were aware of CQC and other guidance. They were able to demonstrate how they were meeting the underpinning principles of the Right Support, Right Care, Right Culture guidance. For instance, people led meaningful lives that included control, choice, and independence. One social care professional told us, "They are promoting independence which, although early days, appears to be working well and staff know to be encouraging independence rather than doing for."

Staff support: induction, training, skills and experience

- Staff received training and support to ensure they were confident and competent in their roles. Staff praised the formal training and ongoing support they received from the registered managers. Staff were trained in Positive Behaviour Support (PBS) and relevant care plans were in place, detailed and up to date. PBS is a form of behaviour analysis that helps staff understand why people may behave in an anxious way, and to put positive strategies in place to help avoid those situations.
- Staff were reminded to regularly refresh their training. This, along with well-planned staff meetings, ensured they had the knowledge and skills to meet people's needs. The registered managers confirmed some core training would return to face to face delivery, as all training had been provided online during the pandemic.
- The provider used an electronic records system. Staff confirmed they had sufficient training and were supported where they had any difficulties in using the system. The registered managers demonstrated a sound oversight of the system.

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

- Staff communicated well with a range of external professionals to make sure people received person-centred care that was informed by appropriate advice and guidance. One social care professional told us, "Staff have a good understanding of people's needs and risks, the management or key worker attends meetings when required." Another said, "The management and staff have understood well what we know about people and we have worked well together as a team in multi-disciplinary meetings and took feedback

on well."

- Staff ensured people had timely access to healthcare services to maintain their health and wellbeing. Advice from healthcare specialists was in people's care files where relevant.
- Care plans gave staff clear information about people's dietary preferences and staff were aware of these. One relative said, "They know their favourites and [person] really looks forward to going for meals with them – sometimes they go out for picnics."
- Where people had a specific condition, this was reflected in assessments and outcomes. There was one instance of a person with a specific condition where good practice would be to have a specific care plan in place for that condition. The registered managers took immediate action to address this and put a plan in place during the inspection.

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 Act 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. Where people may need to be deprived of their liberty in order to receive care and treatment an application can be made to the Court of Protection who can authorise deprivations of liberty. We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People's consent was sought and obtained in line with the principles of the MCA.
- Staff actively considered people's best interests and involved the right people in these considerations. The registered managers had taken part in Liberty Safeguards Protections webinars to ensure they were aware of the implications of new legislation on people's liberties.

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.

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

- Relatives confirmed that they and people who used the service were involved in how decisions about their care were made. For instance, one relative received a call prior to the inspection from the registered manager to establish how a new support worker had got on at their first shadowing visit. The relative said, "They don't just throw people in at the deep end – they settle them in and settle us in. We all work together as a team."
- People and relatives were involved in deciding how staff would support them. There were staff matching processes in place to ensure that people were well matched to staff in terms of backgrounds and interests. One relative said, "They took the time to get to know [person] and don't see them as a task but a person."
- Staff respected people's choices and helped enable them to become more independent.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff were patient with people and treated them with respect and dignity. One relative said, "They are a breath of fresh air, from the managers to the care team. They put our minds at ease straight away as we've had some bad experiences with care before. They have given [person] an improved quality of life and mean we enjoy life more as a family. I can't recommend them highly enough."
- Staff turnover was low so people benefitted from receiving support from stable teams of staff they knew well. Relatives confirmed that people always knew which staff were visiting in advance.
- Staff were knowledgeable about the people they supported and committed to them receiving high quality care.
- People's equality and diversity needs were respectfully considered and met. The provider had in place processes and systems that had regard to people's religious and cultural backgrounds.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect. One relative said, "They get along great and it feels like they're an extended part of the family."
- People's confidential information was stored securely.

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.

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's social needs were well met. People enjoyed a range of activities meaningful to them and were supported to do so by staff who valued and respected their choices. Sufficient time was built into care planning to allow staff to engage meaningfully with people and help them follow their interests.
- People had formed positive bonds with staff and were supported to maintain strong family relationships. One relative said, "They work so well with [person] and go at their pace – nothing fazes them."
- People enjoyed getting out and about with care staff who they trusted and enjoyed spending time with.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received person-centred care from staff who respected their choices, met their needs and gave them control. People's care plans were detailed and accessible for staff and visiting professionals. Where improvements could be made to ensure records were more person-centred, the registered managers took immediate action.

Meeting people's communication needs Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People were given information in a range of formats to help them understand. For instance, easy read editions of COVID-19 information. Assessments of people's needs and care plans included people's communication needs and useful tools such as hospital passports.
- External professionals and relatives confirmed how proactive staff were in supporting and advocating for people when their opinions were sought. For instance, ensuring one person was helped to complete a consultation with a specialist by using a tablet.

Improving care quality in response to complaints or concerns

- There was an effective system in place for managing complaints and feedback. Complaints received had been relatively minor and handled in line with the provider's policy.
- Relatives were comfortable raising any issues with support workers and the registered managers. Relatives and professionals told us the registered managers responded promptly and effectively to any queries.

End of Life Care

- At the time of our inspection no people were being supported with end of life care. However, records

confirmed that staff had received appropriate training and there were appropriate plans in place for people who wanted their preferences noted regarding end of life care.

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.

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

- The registered managers were integral to the effective running of the service on a day to day basis. Staff said, "The managers have done plenty of shifts to make sure we're never short and so people don't have to rely on agency staff." Relatives confirmed the registered managers took a hands-on approach to the service and gave them confidence in their commitment to the goals of the service.
- The registered managers understood their obligations in relation to notifying CQC of significant events which occurred.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on their duty of candour responsibility

- Systems were in place to oversee people's individual support and ensure it was up to date and safe. Care planning was detailed and person-centred. Where risk assessment documentation and other elements of documentation could be improved, the registered managers acted promptly.
- There was a positive, open culture. Staff respected each other and the people they supported. They had worked hard during the pandemic to ensure people were safe and received a continuity of care.
- The registered managers understood their responsibilities regarding the duty of candour. They were open with families and updated and involved them regularly. Staff felt the culture was an open one in which they could comfortably raise any concerns if needed.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Feedback, such as follow up phone calls and surveys, were used to monitor and improve the service. Feedback from people, relatives and health and social care professionals was positive regarding the service.
- Staff were well supported and positive about the registered managers. There were regular staff meetings and service user meetings so the registered managers could ensure people and staff had opportunities to contribute to how the service was run.
- The registered managers had systems in place to monitor, assess and improve the quality of service. Staff undertook some checks and audits and there were clear quality assurance procedures in place to ensure staff were accountable for high standards of person-centred care. The registered manager agreed to review the use of audits with regard to medicines to make it more able to identify and share areas of specific good practice.

Working in partnership with others

- Staff worked well with other health and social care professionals to ensure people's health and wellbeing was maintained. Feedback from these professionals was consistently positive.