

Derbyshire County Council

Disabled Children Service South- The Getaway

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

Disabled Children Service South - The Getaway provides personal care for children up to the age of 18. There was one person receiving a service in their own home.

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

People received an agreed level of staff support at a time they wanted it. People were happy with how the staff supported them and felt there were enough staff to meet their needs. Staff understood how to identify potential abuse and knew what action to take to keep people safe. Checks were carried out prior to staff starting work to ensure their suitability to work with people who used the service.

People chose how to spend their time and staff sought people's consent before they provided care and support. 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.

The staff received regular training that provided them with the knowledge and skills to meet people's needs. People retained responsibility for managing their medicines and health care.

Staff had caring relationships with the people they supported which were respectful. They knew people well and provided care that met their preferences. People were treated with kindness and respect and staff promoted people's independence and right to privacy.

People were supported to maintain their independence and were provided with opportunities to develop their interests and join in social activities. People chose how support was provided and they were involved in the review of their care. People knew how to report concerns and felt they would be listened to.

There were systems in place to monitor the quality of the service and plan ongoing improvements. Staff listened to people's views about the service.

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

Rating at last inspection

The last rating for this service was Good (Published 1 March 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-

inspection 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.

Disabled Children Service South- The Getaway

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

Notice of inspection

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.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We 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. 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 used all of this information to plan our inspection.

During the inspection

We spoke with one member of staff, the registered manager and assistant manager. We reviewed a range of

records. This included one person's care records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with one relative.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives understood how the staff supported them to stay safe. Relatives told us where they were at risk of harm they knew referrals may be made to the safeguarding team to help prevent further harm.
- Staff understood their role in keeping people safe from avoidable harm and abuse. They spoke with confidence about the actions they would take if they thought someone was at risk and would not hesitate to report concerns. Staff were confident that they would be listened to by the management team, who would take necessary action to keep people safe.

Assessing risk, safety monitoring and management

- The risk of avoidable harm associated with people's care had been assessed and the care plan recorded how people had agreed to be supported to reduce risks. Where any risk was identified, support had been obtained from health and social care professionals to ensure risks could be mitigated.
- The risk assessments were reviewed regularly and updated to reflect any change in circumstances which occurred. Relatives told us that they had confidence in the staff who knew people well and supported them safely.
- Information was recorded about how people needed support to leave the home in an emergency. There were personalised emergency evacuations plans in place which were reviewed regularly.

Staffing and recruitment

- People felt there were sufficient staff to provide their support. Each person had a small team of staff who provided care who they knew well.
- Recruitment procedures were in place to ensure, as far as possible, new staff were safe to work with people who used the service. We spoke with one member of staff who confirmed they had to wait for their police checks and references to be completed before they could start working at the service.

Using medicines safely

- People using the service did not need support to take medicines. However, the staff had received training in the safe administration of medicines.
- Systems were in place to ensure that where people needed support, this could be carried out and recorded safely.

Preventing and controlling infection

- People felt the staff maintained good standards of infection control and had personal protective

equipment when this was needed.

Learning lessons when things go wrong

- The registered manager took suitable actions following incidents and learning was shared with staff. Risk assessments and care plans were updated after accidents and incidents to help ensure that the measures in place were effective.

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 the last inspection this key question was rated as Good. At this inspection this key question has now remained the same. 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

- There were no people using the service from different cultures, however, we saw people's gender and sexuality was considered as part of their assessment and care planning. Information, advice and training regarding equality and diversity was provided for staff who understood how to protect people's rights.
- The staff worked in partnership with health and social care providers to provide a holistic approach to assessing, planning and delivering people's care and support. People were satisfied with the care and support they received, and felt their care was in line with best practice.

Staff support: induction, training, skills and experience

- New staff received an induction into the service. When new staff started working they worked with other experienced staff member and had an opportunity to get to know people.
- There was a stable team of staff and the registered manager explained systems were in place to ensure that all new staff completed training based to support people safely.
- The staff received the training necessary to support people and spoke positively about the training opportunities. One member of staff told us they had recently attending safeguarding training which included identifying the risks, reporting and record incidents. The training also challenged staff to review their values and assumptions about stereotypes to help to assist staff to support people to stay safe.
- Staff were provided with support through individual supervision and checks were made in people's homes to ensure the staff were working safely.

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

- People using the service did not need support from staff to maintain a balanced diet. However, staff understood that people chose the food and drink they wanted to eat and where necessary would assist them in food preparation if needed.

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

- People, with support from their parents or guardians retained responsibility for maintaining their health care.
- The staff knew about people's health needs and how this affected their support. Where people received support from community health care professionals, the staff had received training to enable them to carry out specific care and recognise changes. Staff confirmed that where they had any concerns they would discuss this with people and health professionals, when required.

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. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People who used the service had capacity to make decisions about their care and told us staff asked for their consent before providing any support.
- Staff understood that they would need to complete a capacity assessment where they had concerns regarding a person's capacity and understood decisions may need to be made in people's best interests.

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 were supported by staff who were kind and caring, knew their likes and dislikes and got to know them as a person. One relative told us, "It's lovely that they get on so well with the staff and share the same interests; they have such a good relationship."
- When organising support, the provider took into account people's preferences. The provider had an equality policy and staff understood that people's support was based on their individual needs. People's plans covered all aspects of their lives and staff knew about the plans and told us how they supported people in line with them.

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

- People were supported to retain their independence and made the necessary decisions about how they wanted to be supported. One relative told us, "The staff listen to what they have to say, they are brilliant."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected. Where personal care was delivered, people told us the staff took time to ensure they were covered. One member of staff told us, "We stand outside the room when they are providing their own personal care, so they can have their privacy We are always around when needed but it's important to recognise they have their right to privacy too." People chose the gender of staff to ensure people felt comfortable when receiving personal care.
- People were treated as individuals and staff were respectful of their preferred needs. Staff did not have discussions about other people and staff showed they understood the values in relation to respecting privacy and dignity.
- Information about people was kept securely in the office and staff kept personal information about people confidential.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- People had a care plan which had been designed to guide staff on how to provide the care they wanted. One relative told us that staff listened to how they wanted to be supported and provided personalised support.
- People and their relatives were involved in reviewing their care plans and could invite health and social care professionals to any review. We saw the reviews considered how people wanted to be supported and whether they wanted any changes made.

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's communication needs were considered upon assessment and in any review. People felt they received information in a suitable format. Where needed, the provider had systems in place to provide information in different formats to meet people's needs.

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 organised their own activities to meet their interests. Staff explained that care was organised around people's lifestyle choices to ensure they could continue to be involved with education and activities that interested them.

Improving care quality in response to complaints or concerns

- People knew how to raise issues or make a complaint. They felt confident that any issues raised would be listened to and addressed although had not needed to raise any concern. One relative told us, "The service has been 100% perfect."
- There was a complaints procedure in place, which was also available in an easy read style. There had been no formal complaints since our last inspection

End of life care and support

- The service was organised to provide support for children. There were no people receiving end of life care or who had a life limiting condition. The registered manager understood that where there was a concern in this area, this would be explored with the person, their parents or guardian to ensure individual care was

provided.

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; Working in partnership with others

- The registered manager also managed a respite service for children and some of the staff worked in the home and provided personal care in the community. Systems and processes were used within both services and we saw these effectively reviewed the care provision for people receiving personal care.
- Systems were in place to review the service provision, including a review of care to ensure it continued to meet people's needs.
- The service was flexible to ensure people continued to retain control of how they spent their time and had opportunities to continue with their education and activities which interested them.
- The staff enjoyed working in the service and had regular support and supervision with the registered manager; they were able to discuss the need for any extra training and their personal development and were supported to do their job.
- Staff attended regular staff meetings to enable them to discuss any issues arising in the home. We saw minutes of a staff meeting and noted the agenda included any concerns, support for people and training.
- The registered manager attended manager meetings with other managers of services under the same provider. They told us this provided them with opportunities to develop and share their skills and knowledge and gave them support.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 and their relatives felt the staff and registered manager were approachable and felt they were committed to providing a good service and were available to speak with and provide support.
- People knew who to speak with if they had any concerns and felt the service was well managed.
- Staff felt valued and confident to speak up about anything they were concerned with. Staff told us they were proud to work for the service and enjoyed providing their support.