

Kids

Kids Lincoln Office

Inspection report

Commerce House
Carlton Boulevard
Lincoln
LN2 4WJ

Tel: 01522542937
Website: www.kids.org.uk

Date of inspection visit:
04 October 2019
08 October 2019
09 October 2019

Date of publication:
24 October 2019

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

Kids Lincoln Office provides personal care and support services to children and young people who live with physical and/or learning disabilities in their family homes. The service also provides support to enable people to participate in activities at home and within the local community.

Not everyone who uses the services provided by Kids Lincoln Office received personal care. CQC only inspect the part of the service where people receive personal care. This is in relation to help with tasks which focus care needs such as maintaining personal hygiene, support with medication and eating. Where they do provide personal care, we also consider any wider social care provided.

At the time of our inspection the service was providing support to 33 children and their families.

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

People were cared for by staff who understood how to safeguard them from the risk of harm. Risks to people's health, safety and welfare had been assessed and management plans were in place to minimise any identified risks.

The registered provider employed enough staff to make sure people's needs and wishes were met. Staff were recruited safely and trained to carry out their roles and responsibilities effectively.

Staff were consistent in meeting people's health care and nutritional needs. Staff worked together, and with other professionals, in co-ordinating people's care.

People were supported to have maximum choice and control of their lives and staff supported people in the least restrictive way possible; the policies and systems in the service supported this practice. Information was accessible to involve people in making decisions about their lives.

Staff had a good understanding of the needs of the people they cared for and treated people with kindness and their dignity and privacy was respected.

People and their relatives were involved in reviewing their care and making any necessary changes.

The service was consistently managed, and the registered provider had systems in place to monitor the quality of the service. Communication was effective and people and staff were listened to. Staff said they felt well-supported and were aware of their rights and their responsibility to share any concerns they had, including about the care they provided.

Processes were in place to manage and respond to complaints and concerns. There were opportunities for people, relatives and staff to give their views about the service.

The registered provider undertook a range of audits to check on the quality of care provided. Actions were taken, and improvements needed were made quickly when required.

Rating at last inspection

This service was registered with us on 1 October 2018 and this was our first inspection.

Why we inspected

This was a planned inspection based on the need to give a rating for the service.

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.

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

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.

Kids Lincoln Office

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

The inspection was undertaken by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes in the community. It provides a service to children and younger adults. At the time of inspection 33 children and young people were using the service.

There was a manager in post who had registered with the Care Quality Commission. This means that they and the registered 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 service a short period of notice of our inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Our inspection activity started on 4 October 2019 and ended on 09 October 2019. We visited the office location on 08 October 2019.

What we did before the inspection

We reviewed information we held about the service, for example, statutory notifications. A notification is information about events which the provider is required to tell us about by law.

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 took this into account in making our judgements in this report. We contacted local authority service commissioners and Healthwatch to seek their feedback. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We used all of this information to plan our inspection.

During the inspection

We made telephone contact with six of the relatives of people who used the service in order to ask them about their and their family members experience of using the service and three of the care staff team.

When we visited the services office, we spoke with the registered manager, two care staff and the services co-ordinator. We reviewed a range of records. This included specific sections related to six people's care records. We looked at five staff files to check staff recruitment and their training records. We also reviewed records relating to the management of the service and a variety of policies and procedures developed and implemented by the registered provider.

After the inspection

Following our inspection visit we continued to seek clarification from the registered manager to support and validate the evidence we found during our inspection. The registered manager and area manager provided us with additional policy and procedural information as part of this process.

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

- Relatives we spoke with told us they felt the services provided helped keep them and their family member safe. One relative commented, "From a safeguarding perspective they [staff] are very on the ball and we feel safe as a result."
- All staff had received training in respect of safeguarding children and young adults and staff were clear about their responsibilities to safeguard children.
- Staff completed and updated their safeguarding training regularly. Staff told us this ensured their understanding was aligned to the safeguarding policies and procedures the registered provider had in place for them to follow.
- There had been no safeguarding concerns since the service was registered to provide personal care.

Assessing risk, safety monitoring and management

- Staff we spoke with were confident in their roles and had received appropriate guidance to ensure risks related to people's care, their environment and staff safety were minimised.
- Staff were trained to use any equipment needed to help provide safe care. A relative told us, "Staff use the hoist well and the equipment is checked so it is safe to use."
- Staff understood how to protect people from risks associated with their health conditions. Risk assessments were in place and reviewed either annually or sooner in line with people's changing needs.

Staffing and recruitment

- Safe and effective recruitment practices were followed to help ensure only suitable staff were employed. These included satisfactory references and background checks with the Disclosure and Barring Service (DBS).
- Relatives and staff confirmed there were enough staff who were deployed in the right way to support people safely and to ensure people's needs could be met.
- The provider had an on-going programme of staff recruitment and retention and the registered manager was working with and continuing to review staffing levels with commissioners to enable any new need to be met.
- Staff were allocated to people and in most cases the same staff provided continuity of care at each visit. A relative commented that, "The staff are always consistent and we know who is coming in. The staff are very good with communication and let us know of any pending changes as far in advance as possible."
- Some of the feedback we received from relatives highlighted the need for the registered manager to strengthen the information and guidance available to people and relatives regarding the arrangements for staff holiday and short notice absence cover if relatives were unable to cover themselves.

- We discussed this with the registered manager and area manager who took immediate action to review the guidance and arrangements in place and ensure the improvements they were making were communicated to people and their relatives.

Using medicines safely

- Systems were in place for people to receive their medicines in a safe way, when support was required.
- Staff designated with the role of supporting people to take their medicines received regular medicines training and systems were in place to assess their competence to do this safely.

Preventing and controlling infection

- Staff received training in infection control to ensure they knew how to reduce any risks related to cross-infection. Staff had access to equipment such as disposable gloves and aprons, which were available for use as required.

Learning lessons when things go wrong

- A system was in place to record, monitor and review any incidents including to ensure people were supported safely and so that any action identified as needed would be taken to reduce the risk of incidents being repeated.
- The registered provider ensured any issues that arose through their monitoring processes, were addressed with staff individually as part of their supervision or collectively through staff meetings.

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 carefully assessed before any person started to use the service.
- Care plans were developed for each identified care need and staff had guidance on how to meet those needs.

Staff working with other agencies to provide consistent, effective, timely care

- Staff had developed good links with health and social care professionals, education and specialists to help make sure people received holistic and effective care.
- When it had been identified as needed, staff followed health and social care professional's advice to ensure people's care and treatment needs were met.

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

- When it had been assessed as needed, staff supported people with the preparation of their meals and drinks.
- Individual care plan records were kept at people's homes which described people's dietary requirements, likes and dislikes, and the support they needed.
- Where people had a specialist needs to receive their nutrition, staff received guidance and training to ensure these needs were met.

Supporting people to live healthier lives, access healthcare services and support

- Records showed that people received care and support from a range of other health professionals, such as the speech and language therapists, occupational therapists and physiotherapists.
- Staff were aware of the importance of people maintaining good oral health. Part of their induction involved them understanding how to support people to keep their teeth clean if this was needed and identifying any issues which needed feeding back to people's parents as part of the review processes in place.
- Based on people's individual needs, staff understood the signs to look for to indicate if people's wider physical condition was deteriorating. When needed these were reported to the person's parent and the office, for any required action to be taken.

Staff support: induction, training, skills and experience

- Staff received training, including the on-going training they needed to meet identified needs. This included any specialist needs related to the people they cared for.

- New staff told us they completed a comprehensive induction which was aligned to the Care Certificate and as part of their induction, worked with experienced staff members to learn about their role. A staff member told us how they had spent, "Just under two months spent shadowing staff so I got to know the role and more importantly the children I was supporting."
- Staff felt well-supported and were confident to approach the management team for additional support at any time. The support provided included supervision and team working approaches to delivering care.

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. 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 had received training to enable them to understand the MCA and the implications for their practice. Consent was obtained from people in relation to different aspects of their care and there were no restrictions in place for people.

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 management team and staff were caring and kind.
- Assessments took account of people's likes, dislikes and individual preferences including how they wished to be supported.
- Time was taken to ensure that wherever possible staff were matched in line with people's preferences and wishes. This included their preference for a male or a female staff member to support them.
- A relative described their care staff members approach saying, "Our carer is always on time, has a wonderful bond with [name of person]. They listen to any new instruction of dealing with our [name of person]. We cannot fault the service."
- The registered manager and staff understood the importance of maintaining an approach based on people's diverse and differing needs. They told us this helped them to recognise the importance of treating people as unique individuals. A relative commented, "We have been using the service of KIDS for several years now for our family member. [Name of person] requires assistance with all aspects of personal care as well as feeding and drinking. [Name of person] is also reliant on other people for interaction and "fun" activities. Finding the right people is extremely important and over the years we have found some wonderful people."

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

- Communication systems were clear and information about what the service provided was accessible to people dependent upon their needs.
- Relatives and staff told us staff were given the time needed to get to know each other so that they were able to fully understand how care should be provided from the persons and relatives perspective. This enabled people and relatives to express their views and be involved in making decisions about their care. A staff member told us how they promoted choice saying, "I work closely with parents. We explore person centred needs - for example what clothes [name of person] has chosen to wear. Choosing what breakfast [name of person] wants. I also make sure [name of person] chooses the bowl they want to have their cereals in."
- People had family, friends or solicitors who could support them to express their preferences. In addition, records showed that the registered manager had liaised with people's relatives on a regular basis where agreed to ensure people's needs were met.
- The registered manager also told us if people needed any additional help in communicating their views, they could be supported to access information about lay advocacy services. Lay advocacy services are independent of the service and the local authority and can support people in their decision making and help to communicate their decisions and wishes.

Respecting and promoting people's privacy, dignity and independence

- Relatives and staff described how care was given in ways which ensured people's privacy dignity and independence was maintained. A relative told us, "[Name of person] really likes the staff who visit. This is essential for [name of person] and us in maintaining dignity and respect. I wouldn't want anyone delivering personal care that didn't know us well. All of the staff do and this relaxes and reassures [name of person]. The secondary support for us as parents is valuable. We get a break which is really important."
- The registered provider and staff understood the importance of upholding confidentiality and respecting people's right to privacy.
- Suitable arrangements had been made to ensure that private information was kept confidential. For example, Care records were securely stored and computers were password protected.

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 meet people's needs, preferences, interests and give them choice and control

- People and their relatives were involved in planning for their care needs. Care plans reflected people's needs that staff told us about and guided staff about how to meet those needs. For example, maintaining good skin condition and safe moving and handling.
- In addition, relatives described how they were able to use some of the time assessed as needed in a flexible way together with care staff to ensure social inclusion support for them as a whole family and to engage in activities that they enjoyed.
- A relative described how they used some of their time, "To attend appointments and the day to day stuff I need support with but I also use support time to make sure we 'make memories' together. For example, we were supported to go to the Lincolnshire Wildlife Park together. It was the most amazing experience I got to be mum for the day. Even small things like pushing [name of person] wheelchair helps me to be free to be a parent rather than a carer. I've got to enjoy our time a lot more because I don't need to nurse [name of person]. We get parent and child time together."
- Staff completed electronic daily notes detailing the care given after each visit, these included information related to the person's health and well-being as well as specific tasks completed on the visit.
- Care was kept under review and staff enabled people and their relatives to be involved in identifying any changes in their needs and reviewing their care.

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.

- The registered provider had produced information, which described the services they offered and how these would be provided. We saw this documentation was kept under review and updated in line with the development of the service.
- The registered manager confirmed the information about service provision could be produced in a range of formats to suit any communication needs people had.
- When needed, staff were able to use non-verbal communication skills which enabled them to communicate with people effectively. Relatives described how staff understood their loved one's communication needs. One relative told us, "Staff sing in the shower with [name of person]. Staff are good with non-verbal communications and know us so well. [Name of person] gets really excited and happy when the staff come in. I don't think anything could be better and communications are really good."

Improving care quality in response to complaints or concerns

- People knew how to raise any concerns they may have and people and their relatives told us the registered manager was responsive in following up any concerns raised with them.
- A complaints policy was available for people to access. Informal concerns had been responded to with records maintained to show any actions taken. No formal complaints had been received.

End of life care and support

- At the time of the inspection some people lived with life limiting conditions. Where appropriate, staff had explored and care records reflected people's and their relatives' preferences and choices in relation to end of life care. Information was available about any religious and cultural preferences if this support was required.

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.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The registered provider and registered manager had an accessible and open approach to managing the service and the registered manager had a detailed understanding of all of the people who used the service.
- Relatives told us the service was well-led and they were unanimous in their praise for the registered manager and the staff team. Comments we received ranged from, "KIDS are our "life saver" and we have only good things to say. Importantly they are reliable and punctual. Never letting us down. Definitely couldn't manage without them" to "A word for the manager who, as manager, has taken over the helm and kept the dom care ship not just in operation, but on an extremely positive trajectory."
- There was a positive culture where staff and management took pride in the care and support that they provided.
- The manager ensured that arrangements for the management and deployment of staff were carefully planned and regularly checked on to ensure people were the main focus and central to the processes of care planning, assessment and delivery of care. This involved working positively with service commissioners.
- The registered manager understood their role and responsibilities to ensure notifiable incidents were reported to the appropriate authorities if required. They understood the duty of candour responsibility. This is a set of expectations about being open and transparent when things go wrong. No incidents had met the criteria for duty of candour.

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

- The aims and objectives of the organisation were discussed with staff when they were employed.
- The registered manager worked well to ensure the effective day-to-day running of the service.
- Relatives and staff told us the registered manager and management team were accessible to them and approachable.
- The registered provider helped ensure people, relatives and staff received support in the event of an emergency. An on-call service was available when the office was closed.
- Staff told us they could contact the registered manager and senior staff through the cover arrangements in place and that they had access to the number for the on call regional manager who could advise on any specific safeguarding and urgent general issues.
- Staff described how the electronic communication systems the registered provider had in place, called 'Yammer' helped them to be clear about any changes taking place and to submit their own views. One staff member told us, "The team are well-led we use 'Yammer' to access policies and processes. People comment

on issues and we learn together. All of the staff who work for 'KIDS' have good communication."

- The registered manager described how they and staff were signing up to be 'dignity champions' following a communication they had shared on 'Yammer'.
- Regular audits were completed by the registered provider and registered manager to monitor service provision and to ensure the safety of people who used the service. The audits consisted of a range of checks which included medicines, health and safety, accidents and incidents, complaints, personnel documentation and care documentation.
- The registered manager also used their audit processes to focus on exploring ways of continuing to develop services to keep improving the care delivery process.

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

- People were asked for their views and involved in decisions about their care. They were encouraged to be involved in the running of the service.
- Staff meetings were held regularly. Staff told us the meetings provided opportunities for staff to feedback their views and suggestions.
- Staff told us they were listened to and it was a good place to work.
- Arrangements, including communication systems were in place for senior members of the organisation to be accessible to front line staff. Staff told us they were confident in raising any concerns they had at any level within the organisation and that they would be addressed.
- The registered provider produced an annual report to keep people and staff updated on developments made within the whole organisation for the year.

Continuous learning and improving care. Working in partnership with others

- There was an ethos of continual improvement and keeping up-to-date with best-practice in the service.
- The registered manager and staff communicated effectively with a range of health and social care professionals including commissioners to ensure that the person's needs were considered and understood so that they could access the support they needed.