

The Next Step Trust

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Inspection report

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Ratings

Overall rating for this service	Good •		
Is the service safe?	Requires Improvement •		
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

The Next Step Trust is a domiciliary care service. It provides personal care to people living in their own home. It provides a service to adults with learning disabilities who attend their day centre. At the time of the inspection two people were receiving a service.

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

This inspection took place on 17 and 18 April 2018 and was announced which meant the provider knew we would be visiting.

A registered manager was in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Everyone we spoke with was confident the service was safe. Systems were in place to make sure risk was assessed and managed. Staffing arrangements were appropriate and ensured people received care from a consistent workforce. Staff did not administer tablets or liquid medication but they did apply prescribed topical creams. People did not have care plans for this aspect of care but once we brought it to attention of the registered manager they took prompt action to rectify this.

Staff received training and supervision which ensured they understood their role and responsibilities. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. People's nutritional and health needs were met by the main carers. Staff at The Next Step Trust passed on relevant information to ensure any health issues were managed.

People's care records were person centred. Staff knew people very well and staff told us this contributed to the high standard of service people received. Relatives were complimentary about the service provided by the Next Step Trust and told us the standard of care was very good. They told us all staff were kind and

caring.

People's care was planned and delivered in a way that met their needs. Relatives we spoke with said they did not have any concerns about the service and would feel comfortable raising any issues with the support workers or the management team.

The service was well led. The registered manager was knowledgeable about the day to day running of the service as well as their overall legal responsibilities. They were supported by an effective management team. The provider had systems in place to monitor the quality of the service and people were encouraged to share their views to help drive improvement.

Further information is in the detailed findings below.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Requires Improvement
The service has deteriorated to requires improvement.	
Is the service effective?	Good •
The service remains Good.	
Is the service caring?	Good •
The service remains Good.	
Is the service responsive?	Good •
The service remains Good.	
Is the service well-led?	Good •
The service remains Good.	



The Next Step Trust

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Before the inspection we reviewed all the information we held about the service including statutory notifications and contacted relevant agencies. The provider was last asked to complete a Provider Information Return (PIR) in February 2018. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

This comprehensive inspection took place on 17 and 18 April 2018 and was announced. One adult social care inspector carried out the inspection. On 17 April we visited the domiciliary care office and spoke with relatives and staff. On 18 April we spoke with additional staff on the telephone.

During the visit to the office we met both people who used the domiciliary care service because they were attending the provider's day centre. They were unable to tell us about their experience of the service they received from The Next Step Trust so we spoke with relatives who were their main carers. We spent time looking at documents and records that related to people's care and the management of the service. We reviewed both people's care plans. We also spoke five members of staff and the registered manager.

Requires Improvement



Our findings

At the last inspection we found the service was safe. At this inspection we found the service was not always safe. The provider had not breached regulation but improvements were required.

Relatives, staff and the management team were confident the service was safe. They provided examples of how people were kept safe. For example, a member of staff explained how they checked equipment at each visit. Another member of staff talked about infection control and said appropriate protective equipment such as disposable gloves was always used.

People were safeguarded from abuse. The registered manager said there had been no safeguarding incidents since the last inspection. Staff understood their responsibilities around reporting concerns and were confident the management team would respond appropriately.

The provider had systems in place to manage risk. For example, environmental risk assessments had been carried out and covered areas such as checking outdoor areas were well-lit. Staff recorded bath temperatures to make sure the temperature of the water was safe. Each person had a risk assessment checklist which stated if any areas were ticked a risk action plan had to be completed. In one person's file we saw they were at risk of pressure sores, however, there was no formal assessment of the risk or information about how the risk was being managed. Two days after the inspection we received confirmation this aspect of the person's care needs had been reviewed.

Staffing arrangements ensured people's needs were met. We received consistent feedback from relatives and staff that staffing was appropriate and a regular team visited which ensured people received continuity of care. The registered manager told us that all staff who worked at the service had been in post since the last inspection.

The management team told us people did not receive support with their medicines because the main carers took responsibility for this task. Staff confirmed they did not administer tablets or liquid medication but said they sometimes applied topical creams when they were supporting people with personal care. We checked the care records and saw topical medication charts were in place and prescribed cream had been applied. However, people did not have associated care plans. When we brought this to the attention of the registered manager they took prompt action. After the inspection we received confirmation they had liaised with the main carers and developed relevant care plans. The registered manager said they would introduce a system for auditing medication records and would hold a meeting with staff to help prevent a similar incident from

ecurring. Staff who supported people with personal care had completed medication administ raining.								

Good

Our findings

At the last inspection we found the service was effective. At this inspection we found the service remained effective.

Staff received support through training, supervision and appraisal which equipped them with the skills to carry out their role and responsibilities. We reviewed the training matrix which showed staff completed training that was relevant to their role, for example, safeguarding, moving and handling, health and safety, food hygiene, medication administration and epilepsy. A supervision and appraisal matrix showed staff met with their supervisor. Staff told us they were very well supported by colleagues and the management team.

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 who used the service, carers and professionals were involved in making decisions in relation to delivering personal care. Records evidenced people's wishes and feelings were considered, and best interest decisions were recorded in relation to personal care. Staff were confident people were given as much choice and control as possible. In one person's file a capacity assessment had been completed by a social care professional for selecting and using equipment for moving and handling and maintaining safety. Although we saw best interest decisions had been recorded for delivering personal care formal capacity assessments had not been completed. We discussed this with the registered manager on the day of inspection and they wrote to us two days after the visit and confirmed action was taken and the relevant assessments were now in place.

People who used the service received support from their main carers with meals and attending healthcare appointments. We saw evidence in people's care records that staff shared any concerns or changes in conditions with the carers and members of the management team. Carers were then responsible for liaising with healthcare professionals as appropriate. Relatives told us these arrangements worked well. One relative said, "If they spot anything, straightaway they show me and document everything."

Good



Our findings

At the last inspection we found the service was caring. At this inspection we found the service remained caring.

We looked at people's care records, which included a 'one page profile'. These were person centred and contained information about what was important to the person, and included; 'what people like and admire about me' and 'how best to support me'.

Relatives were complimentary about the service provided by the Next Step Trust and told us the standard of care was very good. They told us all staff were kind and caring. One relative said, "They do everything they can. They are very nice. They are lovely." Another relative said, "It's brilliant, really brilliant. They are always respectful." A professional returned a CQC survey and told us, 'I work with Next Step with one client only and they have been very keen for us all to work together and ensure the client and family's needs are met. They have proved to be flexible and adaptable.'

Staff told us they were proud to work at The Next Step Trust. They said staff knew people very well and this contributed to the high standard of service people received. They provided examples of how they ensured people's wishes were respected. One member of staff said, "I love my job because I know we help make sure [name of person] has a quality life." Another member of staff said, "We understand what [name of person] likes. He tells us in his way and we respect that." Another member of staff said, 'Everyone works really well together. I have no doubt what we provide is caring. I'd say it's very caring.'

The provider sent us information before the inspection about how they ensured the service was caring. They said, 'The Next Step Trust values, objectives and vision require that the support provided ensures happy individuals.' They told us policies and procedures were in place to maintain dignity, privacy, autonomy and independence. Staff we spoke with confirmed this, and said policies and procedures were accessible. We saw a statement of confidentiality was kept with people's care records which reminded staff that they must respect and protect information about people who use the service.

Our findings

At the last inspection we found the service was responsive. At this inspection we found the service remained responsive.

Relatives we spoke with said they had been involved in the care planning process. One relative said, "We have meetings and talk about everything. They are really good and make sure [name of person] is included as much as possible." Staff told us they had guidance and information which ensured they knew how to deliver care in a personalised and safe way. One member of staff said, "The care files have lots of information about the person and there is also information about their medical conditions." Another member of staff said, "We are always told if there are any changes. Everything works really well."

Care plans we reviewed contained good information about people's care and support needs. They had a description of the person's support needs which included mobility, sensory and communication, and personal care. They then identified what was the desired outcome for the person. For example, ensuring comfort, safety and well-being. Personal care was broken into specific tasks such as teeth cleaning, bathing, and dressing. Staff told us that one person sometimes enjoyed a bath but at other times they were not as relaxed so shortened the bathing experience. This information was not included in the care plan. The registered manager wrote to us after the inspection and confirmed this detail had been discussed with the main carer and added to the care plan.

Relatives we spoke with said they did not have any concerns about the service and would feel comfortable raising any issues with the support workers or the management team. Everyone knew the registered manager and said she was in regular contact. Staff told us they received feedback from the management team if any areas of concerns had been raised. They said the provider had a clear vision about wanting to provide a service that met people's expectations and would always try and resolve any issues.

The provider sent us information before the inspection about how they ensured the service was responsive in relation to complaints. They said, 'The service user pack has the complaint and compliment procedure detailed. This is also in accessible format. The local Authority and CQC numbers are also provided for direct contact and the Calderdale Complaints policy is included in the information. The process is also discussed during reviews so individuals and carers are clear about the process and their rights. We have been fortunate not to have complaints but any issues brought up are dealt with immediately and the family is reassured that they can come to discuss any issue irrespective of how small it may seem.' The registered manager confirmed they had not received any complaints since completing the provider information return.

Our findings

At the last inspection we found the service was well-led. At this inspection we found the service remained well-led.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was knowledgeable about the day to day running of the service as well as their overall legal responsibilities. They were supported by a manager who dealt with initial enquiries and carried out regular home visits.

Relatives told us the service was well managed. They said the management team were accessible and welcomed any feedback. A relative said, "We can contact on-call and even have the personal number of [name of registered manager] in case we want to contact her direct." Another relative said, "They check everything is ok. They do spot checks as well and staff don't know they are coming."

Staff told us the management team were very supportive and they got clear direction about what was expected of them. One member of staff said, "We get very good support. Communication is really good. If there is anything out of the ordinary we are encouraged to let management know. They are available anytime." Another member of staff said, "The service is very much about meeting people's needs and we do this really, really well. We talk through what's working well and anything that could improve."

The service encouraged everyone to share their views which helped drive improvement. Relatives told us a member of the management team visited the person at home regularly and asked for feedback about their experience of the service. We saw records of the visits were maintained and covered areas such as staff arriving promptly, satisfaction with staff support, involvement in planning care and communication with staff. We saw from the records feedback was positive. Staff meeting minutes showed staff received regular updates and had opportunities to share ideas. We saw feedback from staff was included as a regular agenda item

The management team and lead support workers carried out a range of checks to help make sure people were receiving a safe, quality service. We reviewed records which showed staff supervision, person centred reviews, risk assessments and care plans and staff training were being monitored. Priorities and actions were then agreed to make sure everything was being kept up to date. The management team said they read

people's daily notes to ensure care being delivered was appropriate although they did not sign to confirm this. The registered manager said they would introduce an evidence based system when they audited care records.

Providers have a responsibility to notify CQC about certain significant events such as safeguarding, serious injury and police incidents. Before the inspection we checked our records and found we had not received any notifications. The registered manager told us there had not been any notifiable incidents. We saw when an accident or incident had occurred relevant documentation was completed; this was then reviewed and monitored by the management team.