

Kent County Council

Kent Enablement at Home

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

We visited Kent Enablement at Home on 11 January 2017. Kent Enablement at Home is a domiciliary care agency offering a range of services for people in their own home including personal care for adults. This agency is part of the local authority Social Care, Health and Wellbeing Directorate. The service focuses on providing short term care to adults and older people, including those discharged from hospital. At the time of our visit, the service was providing support for 102 people, and 68 staff were employed. This included support workers, administrative staff and management roles known as locality organisers and supervisors. Kent Enablement at Home was split into two areas and each area had its own team providing the service, led by a locality organiser.

The service required 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. There was a registered manager in post.

The provider had systems in place to ensure that people were protected from the risk of harm or abuse. We saw there were policies and procedures in place to guide staff in relation to safeguarding adults.

We found that recruitment practices were in place, however we found that the service's own policies were not always followed surrounding completion of pre-employment checks prior to a new member of staff working at the service. Staff received regular training to enable them to work safely and effectively

All of the responses from people who spoke with us was that the service was either very good or excellent. People told us they were very happy with the staff and felt that the staff understood their care needs. People confirmed that staff arrived on time and stayed for the length of time allocated and that an on-call system was always available.

Each person we spoke with knew their care plans and said that they were involved in the assessments, each person also told us that all care was provided with their consent.

The staff employed by Kent Enablement at Home knew the people they were supporting and the care they needed. People who used the domiciliary service and staff told us that Kent Enablement at Home was well led and staff told us that they felt well supported in their roles. We saw that the manager and the senior staff were a visible presence and it was obvious that they knew the people and staff who they supported really well.

Suitable processes were in place to deal with complaints and people knew how to access the information, however each person we spoke to had no complaints about the service.

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 was not always safe.

Staff had not always been recruited safely. Appropriate disciplinary and other employment policies were in place.

Safeguarding policies and procedures were in place and staff had received training about safeguarding vulnerable people.

Staff managed people's medication safely when required.

Is the service effective?

Good 

The service was effective.

Staff had undertaken relevant and appropriate training. Staff were provided with regular supervision and an annual appraisal of their work performance.

Staff were appropriately inducted and received on-going training.

Care plans showed specialist advice that had been sought to support people's independence.

Is the service caring?

Good 

The service was caring.

People told us that their dignity and privacy were respected when staff supported them.

People we spoke with praised the staff. They said staff were kind, very caring and helpful.

Is the service responsive?

Good 

The service was responsive.

People who used the service were involved in their plan of care and, where appropriate, their support needs were assessed with them and their relatives or representatives.

Suitable processes were in place to deal with complaints and people knew how to access the information

Care documentation held in people's homes was regularly updated to reflect the achievement of agreed goals.

Is the service well-led?

Good ●

The service was well-led.

The service had a manager who was registered with the Care Quality Commission.

The registered manager and senior staff were open and transparent and staff said communication was open and encouraged.

The quality of the service was monitored continuously by visits to people who used the service and giving them opportunities to express their views.

Kent Enablement at Home

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 was 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.

This inspection took place on 11 January 2017. We gave 24 hours' notice to make sure that the manager would be available. The inspection was carried out by one adult social care inspector. Before the inspection, the provider completed a Provider Information Return (PIR). 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.

Before our inspection, we looked at information the Care Quality Commission (CQC) had received about the service including notifications received from the registered manager. We checked that we had received these in a timely manner. We also looked at safeguarding referrals, complaints and any other information from members of the public.

We visited the office and looked at records, which included seven people's care records, five staff files and other records relating to the management of the service. We spoke with the manager, the senior staff, administrative staff and five other members of staff. The visit was followed up by the inspector with telephone calls to seven people who used the service and four family members. We also contacted other health professionals to ask for their feedback regarding the service.

Is the service safe?

Our findings

People who used the service said they felt safe when supported by the staff. One person who used the service told us "Oh yes, I'm safe and very comfortable". A relative told us "We're safe with them [staff] coming in". We received no reports of missed visits and were told that the staff were almost always on time.

We found that recruitment practices were in place, however we found that the services own policies were not always followed surrounding completion of pre-employment checks prior to a new member of staff working at the service. The policy stated 'At least two references must be taken up along with any other appropriate checks (e.g. qualifications, Disclosure and Barring Service (DBS) check, evidence of the right to work in the UK) and a conditional offer of appointment is made subject to their receipt and approval.' We did not see evidence that this had been adhered to in all cases. This meant the service could not be certain people who were employed were safe and suitable to work with vulnerable people prior to employment. This was immediately brought to the registered manager's attention who informed us that this was to be investigated and acted on.

The provider had a policy in place for identifying and reporting potential safeguarding incidents. Staff we spoke with demonstrated an understanding of types of abuse and the action to take in the event that any potential abuse was suspected. They told us they had a responsibility to report any concerns about their workplace to an outside body if necessary. Records showed that most staff had completed training about safeguarding adults and we saw the training plans in place to update people's knowledge.

We saw that the rota system was very adaptable and the needs of the people were at the forefront of the staffing allocation. We spoke with the administrator responsible for staff rotas and they were able to tell us how they considered staff times, skill levels and responsibility when planning the rotas. Everyone we spoke with told us there had been no missed visits. We also saw the service had disciplinary procedures in place that had been followed according to the service's policy, when required.

We saw that risks to people's safety and well-being had been identified and plans put in place to minimise risk. The risk assessments had been updated frequently as the service spanned a care delivery plan of approximately six weeks, this time period was flexible depending on the person's needs. Risk assessments had been completed for example, moving and handling, the environment, handling medicines and people's physical health. We saw how the service referred to other organisations and professionals if equipment was needed in people's homes to support a person's independence. This was seen to be regularly recorded and reviewed.

We looked at how the service supported people with their medication. People were prompted to take their own medication to promote independence, however some people needed additional help. The service provided medication administration record sheets (MARs) that were available within the care files, these had been completed appropriately. This included the use of creams and ointments. We were told by everyone we spoke to that there were no problems with medicines.

Staff had received training in medication policy and procedures of the service and this was available for staff to refer to.

We saw that the accident records were completed in full and they a process that summarised any accidents or incidents on a monthly basis.

Is the service effective?

Our findings

People we spoke with told us that they felt the staff supporting them were fully trained and had the relevant skills. One person said "All of them are well trained" in their approach. The service employed 50 support staff, 10 supervisors and eight administrative staff. We saw that the administrative staff had attended training to enhance their knowledge for when they were supporting or dealing with any queries from care staff, an example being medication training.

Care staff had an individual supervision meeting three or four times a year and all members of staff received both community based and office based supervision. This was used as an opportunity to inform staff of any changes or issues. Records showed that some of the supervisions took the form of supervised practice and senior staff regularly worked as part of the team alongside the support staff.

We reviewed five staff files in relation to the staff employed and saw evidence that staff had received an induction when they first started working at the service. Records showed that a range of training was undertaken by the staff team and this was confirmed by the staff we spoke with. The training was provided by the service who had senior staff who were qualified to deliver training. The service also provided training through external resources and by e-learning. Subjects included financial procedures, food hygiene, equality and diversity, infection control, information governance, moving and handling and safeguarding. We also saw that there was a training plan in place for the current year we were told how additional training was identified and sourced. This included training surrounding bribery and the supervisors had held workshops on how to complete support plans appropriately. One family member told us "When you ask them something they seem to know" and another relative told us "They seem quite knowledgeable".

Some people who spoke with us had food prepared for them by staff from Kent Enablement at Home. They said they were very happy with everything that was done for them and told us how the staff encouraged them to be as independent as possible. One family member told us how staff ensured their relative was supported to get out of their chair and get to the table to eat their meal as they always had done before they needed support.

The care plans we looked at showed care delivery had been agreed to by the person receiving the service. We saw that people who used the service had signed to say they were giving their consent to receive the care outlined in their care plans.

Care plans included examples of specialist advice that had been sought. For example, a person had been provided with a perching stool to encourage independence around the home. One person who used the service also told us that the service "Had put in a lot of amenities like a bath hoist. They got in touch with people to get stuff". The supervisors of Kent Enablement at Home were also small equipment assessors and were able to make referrals for other pieces of equipment deemed necessary for the independence of a person.

Is the service caring?

Our findings

People told us that staff were always kind and compassionate when attending to them. One person who used the service said "They were all so patient, nothing was too much trouble." another person told us "Yes they were very good, friendly and helpful". A relative said "I've been quite impressed" and another relative told us "They were excellent, if I could have them permanently then I would".

People who used the service and relatives were asked to complete a satisfaction survey and we saw compliments forms One comment made by a person who had received support from the service was 'The dedication and hard work was truly outstanding, efficient and conscientious'.

The people we spoke to felt they were well informed and were also involved in the support being delivered. Each person we spoke with was able to tell us about the information packs that had been introduced at the beginning of the service provision. The pack included information about the terms and conditions of service delivery, information about the Care Quality Commission and the last quality assurance survey summary of findings. The information pack also included 'Your guide to social care in Kent' this included information about how to contact advocacy services and was also able to specify specific advocacy services that would benefit those with a learning disability.

We were told how a relative had been involved in arranging the care package for their family member and how they had been working with the Kent Enablement at Home to review the support. They told us, "At the initial set up of care I was always there when we needed to talk". Another relative said "It's been ideal for dad".

We observed that confidential information was kept in the main office and was locked in secure filing cabinets. The service's electronic/computerised data base which also contained confidential information, was password protected. People's care plans were kept in their own homes and were returned when no longer required, to the office where they were securely archived according to the policy of Kent Enablement at Home.

We asked people and relatives if the staff had encouraged independence and everyone we asked told us staff had. One relative told us "They definitely contributed to dad's independence, they gave him the confidence back". Another relative said "They introduced [person] to easier ways to access hot drinks, very good". A person who had received the service told us how they talked about what they had been hoping to achieve, that they achieved them and that they were now fully independent. We were told "They respected me, they supported me with what I wanted to achieve". Another person told us "They support me to do what I want well".

We were told by one person who used the service "Oh they were very good, I couldn't fault them, they absolutely treated me with dignity" and a family member told us "I'm sorry to see them go." A person who received care from the service also told us "I'm definitely happy with the way they looked after me".

Is the service responsive?

Our findings

Everyone who we spoke with told us they were more than satisfied with the way care was provided, could not fault the approach of the staff, and felt listened to. They told us that they would certainly be able to express concerns about the service if they had any. All of the people we spoke with were sure they would know how to complain if it became necessary but they had not had reason to complain. One person told us "No complaints at all, they're very helpful" another person said "No problems what so ever".

The service had a clear written complaints policy and this was included in the information pack given to people when they started using the service. The complaints procedure advised people of the full procedure and also gave additional contacts such as the ombudsman and information about the Care Quality Commission to use if they were unhappy with any outcome from the service. We asked each person we spoke to if this information was available to them and everyone was able to tell us where they could find it. Comments included "It's in the folder", "It's all in the file" and "I'd look at the information in the file".

We saw that information was kept in two different locations. These were the person's home and on a password protected database. We noted that the database held up to date information about a person's care and this had been documented in the care plan in the person's home. This meant that this person received appropriate care as staff had a clear plan to follow.

All the people we spoke with told us that they had full choice in their care and the way it was provided and they all considered they were in control of the care and support they received. Staff always consulted them about how support was to be provided. One relative told us "They always respect choices".

We spoke with the locality organisers and supervisors and we were informed a service was not provided until they had been to meet and assess the person and develop a support programme, if appropriate and needed. Family members were also invited to be involved. One person told us "They came in and did an assessment first".

We saw records of these assessments and support programmes in people's care files. The documents had been completed in detail and recorded an agreement for the service to be provided. The forms were signed by the person requiring a service or a family member. Following this, the manager gave information about the person to staff, this was supported through discussions we held with the support staff.

Plans were in place for the support which people required. The documentation was clear and simple and had been completed in full. Support staff completed a visit log after each visit and we saw that entries were detailed and described the support that had been given and how the person was progressing towards their goals. We asked people if they felt their care was person centred and each person said "Yes". One person who used the service told us "They listened to what I wanted" another person said "Oh yes, it's very personalised".

We were also shown how Kent Enablement at Home were able to identify that the service was inappropriate

for a person needing support and that another specialist team were contacted and liaised with to ensure the person was able to receive the support they needed.

Is the service well-led?

Our findings

The service had a registered manager who had been in post since June 2011. They were supported by two locality organisers who in turn were supported by supervisors who assessed and drew up the care plans for people. All the staff who spoke with us said the service was well led. One person told us "Supervisors are brilliant, really supportive". Another staff member told how they had received personal support from a locality organiser and that they were "Very supportive". We were also told that the registered manager always made a point of speaking to staff and "Will phone us".

The registered manager told us how they were supported through their line manager within the local authority and also through their colleagues and peers. The registered manager was able to tell us how through these forums they were able to learn from other services within the county.

We also saw that as well as staff receiving supervision and appraisals the managers carried out staff meetings within their areas, last two previous ones were dated November 2016 and January 2017. This gave staff the opportunity to air any issues and receive information about the service.

We saw a quality assurance questionnaire that was sent out on a monthly basis to 20% of people who had exited the service in the previous months. We saw that the results were collated into an annual report, a copy of which was in the Service User Guide. This meant that there was an on-going process of the service acting on issues and comments made. The supervisors also went out into the community to monitor the service being delivered, this was an on-going process.

During the inspection we were able to experience a weekly meeting that included a number of different professionals. We were able to see how the service worked alongside other professionals such as district nurses occupational therapists to ensure care services were personalised, we also saw how the support staff attended the meetings so that the knowledge about day to day support was up to date and relevant. We saw how everyone worked together to adapt a support package for a person who was recently out of hospital, this included organising assessment visits.

The service's policies and procedures had been reviewed by the provider and these included a quality service policy and policies for continuous improvement, confidentiality and data protection, record keeping, financial, adult protection, emergency procedures, challenging behaviour and physical intervention and supervision.

We noted that people's care files were stored securely to protect their confidential information.

We saw that all the documentation relating to the people using the service, the staff and other documentation relating to the running of the service had been completed properly and in a timely manner.

It was obvious from the care plans that there was good partnership working between staff at Kent Enablement at Home and other professionals involved in the care of people being supported.

On speaking to staff we were told how there was an open and supportive culture within the organisation. A staff member told us "In this job I feel like I'm making a difference" and another staff member said "They expect a high standard but at the same time you are supported to do that, they lead by example".