

Next Stage 'A Way Forward' Ltd

Next Stage 'A Way Forward' - Warrington

Inspection report

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23 March 2022

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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?

Requires Improvement ●

Summary of findings

Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance The Care Quality Commission (CQC) follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

A Next Stage 'A Way Forward' - Warrington is a domiciliary care agency, supported living service and offers 'extra care' housing provision to younger and older adults. The service provides personal care to people living with addiction issues, physical disabilities, sensory impairments, mental health support needs and learning disabilities and/or autistic spectrum disorders. Personal care was provided either in the community (across the borough of Warrington), in one residential shared property or across two adapted buildings, each offering single occupancy accommodation.

At the time of the inspection 39 people were receiving personal care across the different services. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. 'Personal Care' is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

People's experience of using this service

Right support

The model of care and settings help to maximise choice, control and independence. People are empowered to remain independent and are involved in the provision of care they receive.

Right Care

People's dignity, privacy and human rights were respected and supported. People received personalised care that was tailored around their likes, wishes and preferences.

Right Culture

The ethos, values and attitudes of leaders and care staff helped to ensure people were encouraged to live confident, inclusive and empowered lives.

Quality assurance and governance measures were in the process of being improved by the manager. We were not always assured that current quality performance or risk management measures were always monitoring or managing quality and safety of care.

Risk assessment and review processes needed to be strengthened. We identified that additional oversight and assurance measures need to be implemented as a way of ensuring that all areas of risk were appropriately recorded and monitored. We have made a recommendation regarding this.

Covid-19 had impacted staffing levels; the provider acknowledged that increased staffing levels were required. The manager and local authority were actively discussing staffing levels and deployment of staff. Recruitment was on-going; measures and procedures to recruit staff safely were in place.

Infection prevention and control (IPC) arrangements were in place. Staff were provided with the relevant personal protective equipment (PPE) and were engaged in routine weekly COVID-19 testing regimes.

Safe medication administration procedures were in place. Staff received the necessary medication administration training, regularly had their competency levels checked and a greater level of compliance oversight had been introduced.

Safeguarding reporting and investigation procedures were in place. Staff knew how to escalate their concerns, knew who to contact and expressed the importance of keeping people safe.

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.

Care records contained person-centred information, positive relationships developed and people expressed that staff provided care and support that was centred around them and their wishes.

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

Rating at last inspection and update

This service was registered with us on 21 January 2021 and this is the first inspection at this registered location. The last rating for the service (at the previous registered location) was 'good' (published 18 May 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

Next Stage 'A Way Forward' - Warrington

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 carried out by one inspector, and two 'Experts by Experience'. An 'Expert by Experience' is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency, it provides personal care to people living in their own houses and flats.

This service also provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home.

This service also provides care and support to people living in one residential 'supported living' setting; people are supported to live as independently as possible.

People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered

with CQC to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was not a registered manager in post.

An interim manager had been appointed, they had submitted all the relevant registration documentation to CQC and received confirmation of their registration status following the inspection.

Notice of inspection

We gave 24 hours' notice of the inspection. This was because we needed to be sure the provider or manager would be in the office to support the inspection.

Inspection activity started on 17 March 2022 and ended on 23 March 2022. We visited the office location on 17 March 2022.

What we did before the inspection

We reviewed information we received about the service. We sought feedback from the local authority and professionals who work with the service. The provider was asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all the information to plan our inspection.

During the inspection

We spoke with eight people over the phone who used the service and three relatives who were involved in their loved one's care packages. We also spoke with one person who requested to speak with us face to face. We spoke with the manager, operations manager and five members of staff.

We reviewed a range of records. This included five people's care records, multiple medication records, four staff personnel files in relation to recruitment and staff supervision and a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records and liaised with one external professional who works in partnership with the service.

Is the service safe?

Our findings

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

This was the first inspection for this service at the new registered location. This key question has been rated 'good'. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Measures to assess, monitor and manage risk were in place. However, we did note that some risk assessments did not always contain the appropriate risk management measures that needed to be considered.
- Risk reviews were not always taking place as required. For instance, quarterly reviews that were due to take place in October 2021 and January 2022 had not been completed. The manager was aware of the improvements that were needed and an action plan had been devised.

We recommend the provider implements improved risk review and auditing procedures to assure safe management and assessment of risk.

- People received care and support from a consistent staff team; they were familiar with people's care needs / risks and escalated any concerns if they presented. One person told us, "If I feel down I know they [staff] will sit and listen to me and that makes me feel safe. They are always here at the time allocated and do all that's required."
- Staff were aware of any environmental or health and safety risks that needed to be safely managed.

Staffing and recruitment

- Staffing levels were regularly reviewed and safe recruitment measures were in place.
- Management expressed that the pandemic had impacted staffing levels but the implementation of contingency plans meant that people continued to receive a safe provision of care.
- Additional staffing hours were required; the provider was actively liaising with the local authority regarding staffing proposals and deployment of staff across the different services.
- Safe recruitment processes were in place. Pre-employment checks were conducted; appropriate references were sought, DBS checks were completed and the necessary risk assessments were in place, where needed.

Using medicines safely

- Medication administration procedures and arrangements were in place.
- People received support by staff who had been appropriately trained and routine medication competency / observations were being completed.
- People had the relevant medication support plan and risk assessment in place; these provided staff with the information and guidance that needed to be followed.
- Routine audits were being conducted. Audits helped to identify areas of improvement, helped to monitor

staff performance and provided assurances that compliance was being monitored.

Preventing and controlling infection

- We were assured that safe IPC procedures were in place.
- Staff were provided with the appropriate PPE and were engaged in routine COVID-19 testing regimes.
- People and relatives confirmed that safe and effective IPC arrangements were complied with. One person told us, "They [staff] wear masks and use gloves." One relative confirmed "They all wear the proper PPE."

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were safeguarded against the risk of abuse, protected from harm and lessons were learnt when things went wrong.
- Staff told us how they would escalate their safeguarding concerns, who they would escalate their concerns to and the importance of keeping people safe. One staff member told us, "I could ring (local authority) safeguarding board, complete a report and send to management."
- People and relatives all expressed that safe care was provided. People said, "They [staff] all make me feel safe" and "I feel safe with my carers." One relative confirmed, "Oh yes I know [relative] feels very safe with them."
- Accident, incident and safeguarding reporting procedures were in place. Staff completed the relevant reports and investigations took place when necessary.

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 was the first inspection for this service at the new registered location. This key question has been rated 'good'. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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 MCA 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.

- Principles of the MCA (2005) were complied with, people were not unlawfully restricted or deprived of their liberty.
- Care records contained the relevant level of information in relation to people's capacity, and consent to care and treatment was always sought.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs and choices were effectively assessed; care and support was provided in line with standards, guidance and law.
- People were actively involved in care and support provided; people received personalised care that was centred around their needs, choices and preferences. One person told us, "The staff know me quite well and know what things I like to do. They are all very helpful to me."

Staff support: induction, training, skills and experience

- Staff told us they were supported by the new manager, encouraged to develop their skills and experience and provided with training opportunities.
- Staff expressed that they enjoyed working for the provider and felt supported on a daily basis. Staff told us, "I enjoy working here, I've been able to progress my way up," and "I've completed a number of training courses since I started, I've had supervisions and general 'chat's, management are always available."
- People and relatives told us that staff were trained, skilled and equipped to provide the care and support that was needed. One person told us, "I think they [staff] are all well trained and know what they are doing. They always ask me before they start doing anything for me and treat me with respect."

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

- Staff provided nutrition and hydration support as detailed in people's care plans.
- People were empowered and supported to remain as independent as possible with their dietary needs.

One person told us, "They [staff] encourage me to do things for myself. For example, to go out shopping with them and they also encourage me to help with meal preparation."

- People told us that staff provided the required level of support, ensuring that their choices and preferences were taken into account. People told us, "They [staff] help me with meal preparation and encourage me to choose what I like to eat. They always encourage me to drink plenty and leave me drinks to have throughout the day" and "I have what I like and that suits me. I want to enjoy my food."

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

- People received consistent, effective and timely care by both Next Stage 'A Way Forward' - Warrington and other healthcare professionals and services.
- People received a holistic level of care that was centred around their support needs; the provider and other external professionals worked in collaboration as a measure of improving and enhancing people's quality of life.
- The provider worked in collaboration with specialist learning disabilities teams, social workers, mental health support teams, chiropodists and local medical services. Any guidance and support provided was incorporated within people's care records.

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 was the first inspection for this service at the new registered location. 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's equality and diversity support needs were respected; staff provided compassionate care. People told us, "They [staff] are all really kind and caring towards me" and "[There is] really good, positive support. I've been here for two years and it's brilliant."
- People's support needs were established; staff delivered care and support that was centred around their individual needs and wants. One person told us, "The staff know me quite well and know what things I like to do." One relative said, "Yes, they [staff] are caring towards [relative], they show such interest in how [relative] is doing, shows how kind they are."
- Staff developed open, honest and positive working relationships with people they supported. One external professional told us, "Interactions I have observed between staff and adults (receiving support) have always been respectful, helpful and caring."
- People told us their needs and wishes were always respected. They said, "I feel really well at the moment and it is due to all the support that I get here," and "I feel that I get all the support that I need, I just feel so much better here and safe."

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected and promoted.
- Staff were familiar with the level of care people needed and support plans contained relevant and up to date information. One person told us, "They all respect my dignity and treat me with care."
- People were encouraged to remain as independent and empowered as possible. One person told us, "They [staff] encourage me to do little jobs for myself." One relative said, "[Relative] is really being encouraged to remain as independent as [they] can be which is really good for [them]."
- General data protection regulations were complied with; confidential and sensitive information was protected.

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

- People were supported to express their views and were involved in the level of care they received. One person told us, "I am involved every three months in the care review."
- The provider had processes in place to involve people in their package of care, ensuring they were receiving the level of care that they needed and wanted. One person told us, "I was involved with a care plan, they all know me and what things I like doing and we all get along really well."

Is the service responsive?

Our findings

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

This was the first inspection for this service at the new registered location. This key question has been rated 'good'. This meant people's needs were met through good organisation and delivery.

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 support needs were fully established and measures were put in place, ensuring people received the appropriate level of support.
- People were provided with information in a way they could understand. For instance, easy read material and pictorial / visual aids were used to help aid understanding and communication.
- Care records contained relevant information in relation the level of communication support people needed. For instance, one record stated, '[Person] is able to communicate with use of facial expressions and tone of voice.'

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

- People were supported to make choices, helped to devise personalised support plans and empowered to have control over their lives.
- Care records contained specific person-centred information which detailed their likes, wishes and preferences. For instance, care records stated, '[Person] would like to engage in pampering sessions with female support staff' and '[Person] enjoys spending time out in the community with staff and his family.'
- Care records contained 'my support plan'; this outlined specific support people needed, how staff needed to provide this support, goals and objectives people wanted to achieve and how they would achieve these.
- 'My support plan' was devised in collaboration the person receiving support and the support staff; people were empowered to maintain a sense of control over the care and support they needed.

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 were supported to develop and maintain positive relationships, empowered to remain as independent as possible and encouraged to engage in social activities that they enjoyed.
- Care records contained information around people's daily routines, social activities, hobbies and interests as well and education and voluntary work that people were attending.
- Staff developed a good understanding of the people they supported and what they liked to do in their free time. For instance, care records contained information such as '[person] likes to walk into the town centre as [they] don't like using public transport' and '[Person] goes to the supermarket twice daily, (which supports

their independence.'

Improving care quality in response to complaints or concerns

- The provider had an up to date complaints policy in place.
- People and relatives were provided with the complaint policy and knew how to raise their concerns. One relative told us, "If we did need to complain about anything I would feel happy doing so and would feel confident that it would be followed up."
- Staff confirmed that they would actively encourage people to submit any concerns / complaints as a measure of improving the provision of care. One staff member told us, "I've supported people to make a complaint, they were listened and responded to."

End of life care and support

- End of life care was not being provided at the time of the inspection. However, the provider did have the relevant documentation in place should this provision of care be needed.

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 was the first inspection for this service at the new registered location.

This key question has been rated 'requires improvement.' This meant the service management and leadership processes required improvement. Strengthened quality assurance measures needed to be implemented to assure the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Managers and staff were clear about their roles. However, risk management, monitoring processes and quality performance measures required attention.
- Measures to monitor and manage the quality and safety of care needed strengthening. Support plans and risk reviews had not been regularly taking place as required.
- We were not always assured that all areas of risk had been recorded or that risk assessment records contained the relevant information.
- We had to inform the provider that their registration details in relation to 'service type' was inaccurate. The provider immediately responded to this and submitted the necessary notification and statement of purpose documentation.
- The manager had devised an action plan; they recognised that quality assurance and risk management measures needed improving.
- Regulatory and legal requirements were complied with. The manager was aware of their responsibilities and understood the importance of complying with regulations.

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

- The provider engaged with others as a measure of establishing feedback about the quality and safety of care being provided.
- Quality assurance questionnaires had been circulated. However, at the time of the inspection there was no evidence to assure us that suggestions and feedback were actively responded to or acted upon.
- Staff told us they were supported, valued and felt a sense of purpose working for the provider. Staff said, "I enjoy working here, this is one of the best [providers]" and "[Manager] is one of the best I've worked with."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- A positive, person-centred culture was promoted; good outcomes were being achieved.
- There was an open culture; the values and ethos of the service was centred around empowerment and supporting people to remain as independent as possible.
- People were encouraged to set realistic goals and objectives, outcomes were discussed and staff observed

people developing essential independent living skills. One person told us, "Compared to the last place [I received support] this is heaven, I can trust and rely on staff, I'm developing new skills."

Working in partnership with others

- The provider worked in partnership with other external professionals and services.
- Developing effective professional partnerships meant that people received a holistic level of care in a timely and consistent manner.

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

- Open and honest relationships had developed; duty of candour responsibilities were complied with.
- People and relatives expressed that effective lines of communication were maintained. One relative told us, "I know they [staff] would always contact me if they thought it was needed." One person said, "They keep me well informed as to what is happening. I have already recommended this service to others."