

Kids

KIDS Bracknell

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

KIDS Bracknell is a community-based care provider for children and young people aged up to 25 years old. The service supports people living with learning disabilities or autistic spectrum disorder and those with a sensory impairment or physical disability.

KIDS is a bespoke care provider with five registered locations. They provide a range of services such as personal care, respite, short breaks, group sessions and befriending. The provider also runs services regulated by Ofsted. At the time of the inspection, four children and young people were receiving personal care or support from the service.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This 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 and what we found

Children and young people were protected from abuse, neglect and discrimination. Staff knew the vulnerability of people who used the service, and ensured their risk of sustaining harm was reduced. The service protected people and families from the risks of COVID-19 and supported them well during the pandemic and lockdowns.

Staff had the necessary knowledge, skills and competencies to provide effective care. People's likes, dislikes and preferences for care were recorded in their care plans. Community-based social and healthcare staff were involved in people's care when required. Consent was obtained and recorded in the right way.

Relatives told us the help and support received for their children was invaluable. This meant they could enjoy life in their own home safely and with the right support. They told us staff exceeded their expected responsibilities and helped their children to live as independently as possible. The staff, registered manager and provider shared a vision to foster the rights of children living with a learning disability or autism. The service promoted and celebrated equality, diversity and human rights.

Care plans were personalised. They contained the necessary information for staff to provide support in accordance with people's needs. The service understood the importance of communication with the children who received support, and ensured that there were alternative methods in place. There was a suitable complaints system in operation.

Families and staff said the service was well-led. There was an open, positive culture at the service. Staff worked towards clear organisational aims and objectives. There were positive comments about the registered manager from everyone we spoke with or contacted. Social care professionals confirmed the service worked closely with them to achieve good care outcomes for children and young people.

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.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. KIDS Bracknell were advocates for children and young people living with complex care needs. Care workers supported children, young people and their families to determine their own lifestyles. Staff provided very person-centred care in line with preferences set by people and their families. The provider had clear aims and objectives to ensure people with disabilities were protected, engaged in care and could live the best possible life. The clear focus of the support was on ensuring people and families enjoyed a good quality support. The staff, registered manager and provider shared the service's culture of ensuring people were at the centre of the care. The staff and provider listened to people and their families, and acted on ideas and suggestions.

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

Rating at last inspection

This service was registered with us on 15 July 2020 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date of registration.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Outstanding ☆

The service was exceptionally 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 Bracknell

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 an inspector, a specialist advisor and an Expert 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.

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

Notice of inspection

We gave the service 48 hours' notice of the 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.

Inspection activity started on 15 July 2021 and ended on 23 July 2021. We visited the office location on 21 July 2021.

What we did before the inspection

We reviewed information we held and had received about the service since its registration. We sought feedback from the local authority, safeguarding team and other professionals who work with the service. We checked information held by Companies House and the Information Commissioner's Office. We checked for any online reviews and relevant social media, and we looked at the content of the provider's website. 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 when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke with three relatives about their experience of the care provided to their children. We wrote to the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We spoke with the registered manager. We received feedback from the regional manager and another six staff. We contacted the local authority and received two written replies from social workers.

We reviewed a range of records. This included two people's care records and medicines administration records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. After the site visit, we requested and received further information from the registered manager about quality assurance processes.

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

- Family members of children who used the service provided confirmation that the service was safe.
- They stated, "Yes absolutely safe. We have been around them [staff]...they are very safe with them. The children would not go to them if not feeling safe", "Yes, she [the child] is safe. The council who contacted them [the service] for us had extra checks. They [staff] are capable of supporting her. She is happy around them", and "Yes, he [the child] is safe. Always with me and him. He knows the carer [care worker], he knew her from school. She know his quirks."
- Children and young people at risk of harm were protected from abuse, neglect and discrimination.
- There was a suitable safeguarding policy in place which explained what steps to take if there was any allegations of abuse or neglect. There was also information available for staff about whistleblowing.
- Staff completed training in safeguarding and whistleblowing. They were required to repeat the training at set intervals. The registered manager had completed advanced training and understood their role in protecting vulnerable people.
- The registered manager was knowledgeable about how to manage a safeguarding allegation and who to contact.

Assessing risk, safety monitoring and management

- Children's and young people's risks were assessed prior to commencement of their package of care. The service made sure they could care safely for anyone referred to them by the local authority.
- Information was gathered from commissioners, social workers, the child or young person (if possible) and their families or carers. Staff used all of this information to formulate the risk assessments. The registered manager explained a step-by-step approach to formulating risk assessments over a series of days.
- Risk assessments were updated with additional information as more details became available. The registered manager explained they visited people to ensure that risk assessments were relevant and up to date. They also received information from care workers which was used to update risk assessments.
- A range of risks were assessed. These included the person's home environment, moving and handling, skin integrity, nutrition and hydration and medicines management.
- As risk assessments were updated, new copies were taken to the children's or young person's house. This ensured a current version was always available for the care workers and family members to view.

Staffing and recruitment

- There were enough staff deployed to meet the children's and young people's needs.
- The registered manager said the care packages were completely flexible; they could be changed, support calls could be cancelled or altered to suit the needs of the family or carer.

- A suitable rota was in place to ensure care workers completed people's support calls in a timely way. The children, young people and families had good continuity of care workers who knew them well.
- Staff personnel files contained the necessary checks and documents to ensure only 'fit and proper' persons were employed. For example, there were checks of staff members' previous conduct in similar roles, enhanced criminal history checks were conducted and there was a full job history recorded.
- Families confirmed safe staffing. They said, "Yes more or less, we know all of them [staff]", "She [the child] is getting used to them" and "[We have] just one regular carer [care worker]."

Using medicines safely

- Staff received extensive training in medicines management to ensure they were safe to administer medicines. Not all children or young people received support with their medicines.
- Training consisted of e-learning, practice-based scenarios, 'shadowing' an experienced care worker administer medicines, observed practice and a final competency sign off.
- Appropriate records of medicines administration records were maintained. Checks of these for any errors or omissions were completed by the registered manager or team manager.
- Where appropriate, families or carers could be supported by the care workers to safely manage and administer their child's medicines. A family member stated, "No concerns regarding medicines."

Preventing and controlling infection

- Children and young people who used the service were vulnerable to all infections, including COVID-19. People were effectively protected against the spread of infections.
- Staff completed mandatory training in infection prevention and control. Additional training was provided for the prevention of COVID-19 transmission. This included information about the disease, how to put on and take off personal protective equipment (PPE) and testing for specialist face mask fitting.
- The service supplied staff with appropriate PPE. This included disposable gloves, aprons, eyewear or visors and masks.
- Staff maintained hand hygiene by washing their hands or using alcohol-based gel which they carried with them. This prevented the spread of infections.
- Families confirmed staff used PPE correctly and as required. They said, "[Staff] always wear PPE", "Yes, they wear PPE and wash their hands" and, "Yes, care workers wear PPE and wash their hands."
- The service ensured they followed government guidelines throughout the COVID-19 pandemic and lockdowns. The registered manager knew where to find the required guidance. The provider had a business continuity plan that covered mass staff shortages and pandemics.
- Staff completed regular viral testing as part of the national programme to ensure they were safe to work with people.
- A care worker stated, "PPE has become the norm for us as we all understand the vulnerability of a lot of our young people and respect our colleagues."

Learning lessons when things go wrong

- There was an appropriate system in place to log accidents and incidents.
- The registered manager explained how they would manage any reported accidents or incidents.

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 fully assessed before they could start to use the service.
- Care plans were developed for each care need and staff had instruction on how to meet those needs. Staff worked with other agencies to provide consistent and effective care.
- Staff had developed good working relationships with health and social care professionals to ensure people received person specific and effective care.
- When it had been identified as needed, staff followed health and social care professionals' advice to ensure people's care and treatment needs were met.
- A care worker told us, "At KIDS we work as a team to ensure that high standards are maintained at all times. We all try our best that the needs of each child/young person is met according to their individual needs and everyone goes home happy."

Staff support: induction, training, skills and experience

- The service found it difficult to access some specialist training during the pandemic. The provider information return stated, "The main barrier has been accessing face to face training such as, positive behaviour support. However, now that services/training providers are re-opening up it is on our plan to book staff onto training to update, renew or provide first time training in this area."
- Records confirmed that staff had received a range of training, including the on-going training they needed to meet identified needs.
- The registered manager provided us with a detailed action plan showing steps the service would take to ensure the specialist training was offered to relevant staff. Topics included understanding autism, understanding children and young people's mental health, understanding behaviour that challenges and understanding specific learning difficulties.
- A staff member wrote, "I have always felt fully-equipped to provide the support to our young people. The induction process upon starting at KIDS was thorough, with access to compulsory training on virtual college and numerous other training opportunities that I can access in my time should I want/need to."
- Another commented on their professional development. They stated, "I feel that working for the service has helped me grow in confidence, compassion, skill, and knowledge in areas I did not even know existed and I don't think there has ever been a day working for the service where I haven't learned something new, whether it be about a specific young person, strategies for supporting young people, or things that I learn from the young people themselves."
- All staff completed an induction similar to The Care Certificate and as part of their induction when they were first appointed. They then worked with and shadowed experienced staff members to become familiar with the people they were to support and to learn about their role.

- Staff were well supported by the registered manager. The support provided included supervision and team working approaches to delivering care.

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

- People's care plans highlighted their dietary requirements, likes and dislikes, and any support they needed.
- Staff supported people to take drinks and snacks that they liked in a safe way.

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

- Care records confirmed that people received care and support from a range of other health professionals, such as the speech and language therapists and occupational therapists.
- Staff received training that highlighted the importance of people maintaining good oral health. People's care plans highlighted the support that was required to keep their teeth clean.
- If staff were concerned about any health care issues a person may have, they reported these to the person's parent and the office, for any required action to be taken.

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

- The service worked exclusively with the local authority to enable children and young people to receive effective support tailored to their individual needs.
- Social care workers confirmed that there was a positive working relationship between the two organisations.
- Care documentation showed extensive involvement of other healthcare professionals, such as the children's GPs, specialist nurses and other practitioners such as occupational therapists.
- The service supported children, young people and their parents or carers with healthcare appointments, for example if they needed to attend a hospital.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Restriction and restraint were not used by the service. However, staff received training about how to manage behaviours that challenge in a positive manner.
- Consent for the care of children was made in their best interest. Parents, social and healthcare professionals were consulted. The service recorded consent within the care documentation.
- Prior to providing support to a person at their care call, staff checked valid consent was in place.
- Staff received training in obtaining consent, and the principles of the MCA. They understood that consent could be withdrawn at any point.
- Policies and procedures were in place which protected people and their rights under the MCA. There were

processes in place for complex matters, for example if an advocate was required to assist decision-making. An advocate is an impartial person who can represent a person in their best interest in major life decisions.

- Families confirmed staff obtained consent at each visit. They stated, "They [staff] ask permission, even through non-verbal [communication]", "Yes, they [staff] ask consent, for example, when we are going for a walk" and "Well, they let him [the child] know what they [staff] are going to do."

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 outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- The children and young people who received support from the service were extremely vulnerable and at risk of discrimination and harassment in society. The service ensured that they were treated with respect, compassion and kindness in every interaction. The staff also actively protected people from harm by others, always acting as advocates for them and their families or carers.
- In the annual parents' and carers' satisfaction survey for 2020-2021, 100% of responses agreed that KIDS was "friendly and caring." Across all of the questions in the survey, the responses were consistently positive. This included whether the respondents would recommend the service to others. Parents' comments were consistently positive. Regarding staff they said, "Yes, they are kind and caring. When the kids fall, they make sure they are loved and safe", "Yes, they are kind. They treat us with dignity and respect. They show empathy. They clap hands with her [the child] and hold conversations with her" and, "Kind and respectful of his [the child's] dignity."
- Equality, diversity and human rights were central to the provider's and service's model of care. This was demonstrated throughout the service, from policies and procedures, care documentation to support and evaluation of care we observed. The service was fully aware of the CQC's statutory guidance of 'Right support, right care, right culture' and had embedded this into everyday practice.
- Staff received training in equality and diversity. They also understood how to hold difficult discussions with young people, for example about sexuality. The service recognised that sexuality was an important part of people's lives, and that it may be more comfortable for a child or young person to discuss this with staff rather than with a parent or carer. This offered people the opportunity to feel involved, included in society and prevented feelings of isolation or indirect discrimination.
- Although the children and young people who were supported were unable to voice their opinions of care directly to us, there was consistently positive feedback about the staff, service, provider and support packages. Social workers who knew people, parents and carers well told us the service and its staff made an overwhelmingly positive impact to lives.
- For example, a social worker stated, "The support that [the care worker] provides in [the child's] home has been invaluable. She has supported mum with washing, bathing, cutting nails and [continence]. She has an excellent rapport and relationship with [the child] and the family, and has also provided emotional support and advocacy...at times when things have been difficult.
- Another commented, "[The children's] parents cannot compliment any higher the support from KIDS to allow them respite time...to have time to themselves and sleep...to prepare for the early mornings and know their children are safe. [The children's] parents have shared they do not know how they coped prior to this support being in place."

- The registered manager was repeatedly praised for ensuring people were well-treated and protected. One staff member stated, "[The registered manager] is a strong manager within KIDS locally and externally with other providers and the local authority. She is hard working and committed to supporting the people who use the services and the teams who work for her. The service puts the people accessing it at the forefront. The service offers transparent support, communicating well with all those involved directly with the people being supported."
 - The registered manager protected children and young people during the pandemic by staying up-to-date with information and taking swift action. A commissioner stated, "[The registered manager] is great with communication and has attended all forums or meetings and training that the local authority have put together during [the pandemic]. [They have] also communicated effectively if there was a positive case of COVID-19 and followed the correct procedure and process [to protect the person and family]."
- Staff overwhelmingly expressed how caring the service was, and their dedication. Comments included, "I know that the service we provide hugely benefits the families that we support and I also enjoy all the support that I provide", "I always feel as though I have the appropriate information on a young person so I can provide the support to the best of my ability through care plans, feedback forms and communication between staff" and "...the support that I provide at two of the individuals homes it is a set routine made by the parents to which we follow. The care is child-led meaning that the young people decide what they want to do and play with."

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

- The staff and management of the service genuinely appreciated and realised that the children and young people supported had every right to live life in the possible way. They continuously engaged with parents, carers and social workers to foster inclusivity in care planning, decision making and reviews.
- Where the children and young people could not express their own decisions, the service promoted open and meaningful discussions with parents. However, the care workers did not rely solely on this but incorporated their everyday observations of people's reactions into the decision making. For example, if a child did not like a particular activity or way of being supported, staff used this knowledge to offer alternatives. They then evaluated, with the assistance of the parent or carer, whether the right choice had been made in the child's best interest.
- Care documentation the service formulated put children, young people and parents or carers at the centre of the support offered. They contained specific life goals and objectives to enable people to lead a fulfilling life. Goals included education, socialisation, personal care independence and life aspirations.
- For example, one person's care plan stated, "My journey (aspirations) is to play independently; to interact with other family members." Another stated, "(What is important to me) is being encouraged to stand where possible, to attempt to sit [in the bathroom] during pad change and to be treated with dignity and respect."
- Children and young people's social histories and life stories were recorded in detail. This included information about culture, faith, family interactions and traditions that staff followed when supporting the child or young person.
- Detailed information in care documentation provided staff with the information they needed to provide support in the right way. The documentation was holistic, and included descriptions of emotional and psychological welfare of the person. One child's care plan explained how staff would recognise whether they were happy. It said, "I smile, clapping, happy high-pitched noises, waving my arms and head around; it is easy to tell when I'm happy." Another stated, "Bath time must be a positive experience for me as I can be sensitive to having my hair washed and this can make it difficult for my hair to be clean." This demonstrated staff considered all needs of the child, to foster excellent personal care.
- The registered manager explained that care plans were regularly reviewed and updated. Each time a change was made, a new copy was placed into people's homes. This enabled the parents or carers to always have access to the most up-to-date information.

- Parents and carers confirmed they had a say in how the support was provided to their child, and the service respected their voice. Comments included, "Yes they listen and try to decipher what he [the child] says", "Yes, they listen to me and act on what I say" and, "Yes, always they listen to me."

Respecting and promoting people's privacy, dignity and independence

- The service had a clear focus on encouraging, developing and maintaining children's and young people's independence. They actively fostered people to experience a life similar to that of any other child or young person. Staff supported people's independence, and ensured this was within a safety
- Technology was used to enable people living with a disability to lead as normal a life as possible. For example, one person had an electronic device that was positioned on a table and could use an assisted arm to move food from a plate or bowl to their mouth. This prevented the child from spilling the food, but ensured that dignity was maintained and promoted their independence. This meant the child did not have to always be supported by another person, and could still maintain their own nutrition.
- Records from the local authority showed how the service enabled children and young people. A quality assurance audit with the council dated August 2020 stated, "We enable our young people to gain confidence in everyday life skills such as, budgeting, travel training, shopping, preparing simple snacks, drinks and meals. We also enable our young people to engage in social opportunities with their peers. This all takes place in an environment which is stimulating and fun." This meant the service looked at how a child or young person's life could be enriched by fostering more than just personal care skills.
- A person usually supported by several staff at the same time was assisted by a single staff member on a trip to London, where they wanted to see a national gallery. It was their first time on a train and without several staff present at once. The parent stated, "[The staff know the person] really well. We invited one to come to London with us. This was something 'normal' families would do."
- Parents and carers commented that people's privacy and dignity was always maintained. Feedback included, "Yes they [staff] respect our privacy. They keep the children from busting in on us when we are having time [respite] to ourselves."
- The service's handbook clearly set out how children's and young people's rights were protected by staff. It said, "All children and young people are treated with dignity and respect. KIDS staff believe passionately in the service we provide, where possible staff will encourage and enable children and young people to gain independence in their care; support the learning of life skills to enable children and young people to participate in their community; and above all will treat children and young people as individuals in an environment that fosters mutual respect."
- Staff told us how children were encouraged to be independent and grow. One care worker stated, "My children [people who used the service] and KIDS have defined the person I am today. Some days can be quite challenging and I dust myself off because tomorrow is a new day. It is not about what I get out of the service it's what the young people and their parents and carers get from the service." Another staff member said, "We have close working relationships with the young people that we support and their families, staying in regular contact with parents/carers to ensure that the support meets their expectations and is benefitting their young person. This allows us to continuously review the support that we provide and adapt where necessary."

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

- Staff were enthusiastic about the provision of individualised care to children and young people. One said, "I absolutely adore working at KIDS. The young people literally make my heart melt. Every achievement is met with praise and adoration and those achievements might seem insignificant to some, but can be monumental to the children and young people who we support."
- Another care worker stated, "We are all passionate about providing a quality service to all of our young people and their families and work tirelessly to ensure that the every service user is a priority and that we are providing a person-centred approach to the way support is given."
- Parents and carers confirmed support from the service was provided in the preferred way. Comments included, "Yes, care is carried out way I prefer; 100%" and "All care is done the way I prefer [for my child]."
- People and their relatives were involved in planning for their care needs. Care plans reflected people's needs and instructed staff about how to meet those needs. For example, what activities people wished to participate in and what made them happy.
- Care plans were reviewed regularly with the input of people and their relatives. This was to ensure the care provided continued to meet their assessed needs and was adjusted where required.
- The registered manager told us about one instance where a family was struggling and needed more support time. They approached the commissioner and requested further hours to support the child. The funding authority then agreed to extend the support time which better met the family's needs.
- Staff completed daily notes to confirm the care and support they provided. This included the tasks or activities undertaken and the well-being of the person.

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 children's and young people's communication needs and preferences were recorded in a specific care plan. This enabled staff to know the best way to interact with people.
- This was confirmed in the provider information return, which stated, "The children we support have either limited verbal communication or communicate non-verbally. Their communication preferences are detailed in their care plans and staff are aware of all preferred communication methods."
- Staff have access to the correct communication method or aids for the child they are supporting.
- The registered manager confirmed the information about service provision could be produced in a range of formats to suit any communication needs people had.

- Staff knew how each person communicated best this included, Makaton (a form of sign language used by people living with learning disabilities) and Picture Exchange Communication Systems (PECS) where picture cards are used to also aid communication.
- Staff also used non-verbal communication, especially with children who were supported. They observed facial expressions, behaviour and other vocal sounds to determine what people liked and preferred. For example, this applied to washing and dressing and activities.

Improving care quality in response to complaints or concerns

- People, families and carers knew how to raise any concerns they may have. They told us they had no reason to raise a complaint because they felt the support received by their children was excellent.
- A complaints policy was available for people to access. The registered manager confirmed a copy of this had been provided to each family.
- Alternative formats of the complaints procedure were available. These included easy-read, pictures and Makaton versions.
- Since registration, no formal complaints had been received by the service. The registered manager was knowledgeable and experienced about how to act on, investigate and record any concerns or complaints.

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.

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

- Any service that delivers care can have a 'closed culture'. We define a closed culture as a poor culture that can lead to harm, including human rights breaches such as abuse. In these services, people are more likely to be at risk of deliberate or unintentional harm. KIDS Bracknell was open, honest and transparent in all aspects, from support provided to children and young people through to leaders. People were protected by the staff and organisational approach.
- The service had an extensive statement of purpose which explained the culture underpinning support provided to people. A statement of purpose is required by regulations and contains contact information as well as aims and objectives of care.
- The statement of purpose was available in formats for children and young people, as well as families. This meant there was easy access and clear information about the service to those who wished to review it.
- There were clear, realistic goals set for the service. The mission statement said, "Everything we do places the child/young person at the centre of our support, our services then focus on providing care, which wraps around the child within their family." The inspection found the service placed people at the centre of the support provided.
- There were positive outcomes for children and young people supported by the service. This included fostering their independence, learning life skills and advancing into education or training and integrating within society.
- The service realised the importance and effort of their staff during the pandemic. The provider information return stated, "Staff have responded with high levels of commitment throughout COVID, the local authority rewarded staff performance with a small thank you gift. KIDS has recognised that during the pandemic staff well-being has been more important than ever. Well-being has been addressed nationally through the Employee Assist Programme, online wellbeing resources and locally through additional communication with staff to check in on how they are and address any worries or concerns."
- There was clear oversight of the service from the provider. The regional manager wrote, "With regards to line management support [the registered manager] reports to me and we have a minimum of weekly catch ups (phone calls or video calls). This has been particularly valuable over the last 16 months, where our movements have been impacted due to COVID-19."

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

- There were no notifiable safety incidents which required this part of the duty of candour regulation to be

used.

- However, the registered manager had a satisfactory understanding of the duty of candour requirement. They explained candour as "Honesty, integrity and transparency."
- The registered manager confirmed they would refer to regulations, their regional manager or a CQC inspector if they had questions about the duty of candour. They were aware of available guidance.

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

- The registered manager was knowledgeable, skilled and experienced in leading the service. They had worked for the provider for more than 10 years, which enabled them to develop their managerial skills well.
- The registered manager understood their role well. They explained it was their responsibility to assess and monitor the quality of the support provided to people. The registered manager demonstrated they had a satisfactory knowledge of regulations and associated guidance about community-based care. They had detailed knowledge about support for children and young people with learning disabilities.
- Families confirmed the good support provided by the service's staff and leadership. They said, "Yes, well managed. Had a hospital appointment. They have collected me and my son from the hospital; helpful", "Yes, well managed" and "To the best of my knowledge, good management."
- The registered manager explained their part in the provider's working groups for driving organisational improvement. They were part of policy and procedure review meetings.
- The regional manager told us, "[The registered manager] works well within KIDS, linking in with the head of quality and performance, the safeguarding manager and with the organisational health and safety lead. [The registered manager] is also an active member of the policy group, ensuring the voice of services for children with more complex needs (and in receipt of short breaks) is heard."
- A small number of audits were completed by the management team to check the quality of the service. The senior care workers completed unannounced 'spot checks' of care workers who supported people. These ensured that staff completed personal care in the right way and in line with the service's high standards.
- Staff were overwhelmingly positive about working for the service, and support from the registered manager. Comments included, "I have been working with KIDS for 18 months, starting a month before the pandemic arose. Although things have changed, the service has adapted and stayed as strong and as dedicated as before", "...my experience working for the service has been amazing", "I feel like I am fully supported by the senior team at KIDS as they are always there to offer support and guidance if it is ever needed" and "I am truly grateful to [the registered manager] for her support and guidance throughout the years and in turn I provide the same guidance and support to the team."

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

- Staff were treated as active partners in the management of the service.
- A social worker said, "Morale; really good, everyone is pulling together. Staff have a social [chat] over WhatsApp, lots of opportunities to feel supported and discuss concerns. [The registered manager] will touch base with all staff...weekly either by call or text."
- The service ensured people's equality, diversity and human rights. They actively worked on inclusion for people living with a disability and promoted life opportunities for children and young adults.
- The provider information return said, "We are seeing an increase in young people gender transitioning, whilst staff ensure they are using the correct pronouns and information is shared with relevant staff with the permission from the young person, this is a new area for us and we have recognised that we need to enhance our knowledge. Therefore, we have arranged training for staff to upskill their knowledge in this area, ensuring that they can be supportive and know where to signpost young people to for further

information."

- Surveys were sent to families annually. The results of the 2020-2021 survey were positive within all responses. For example, 75% of parents or carers felt their, "...child's situation had improved thanks to help from KIDS."

Working in partnership with others

- Social care professionals we contacted confirmed good joint working, especially during the pandemic. They told us care workers and other staff acted as advocates for the children, young people and families they supported.
- One provided recent feedback from a family. They said, "[The staff member] has spoken in support of the family, both in professional meetings and in emails. The family have great trust in [the staff member] and they accept and appreciate her support, which is a wonderful achievement for this family who are often reluctant to offer support in the home."
- The regional manager stated, "The service puts the people accessing it at the forefront. The service offers transparent support communicating well with all those involved directly with the people being supported."
- One parent stated, "The younger children also gravitate to the KIDS staff which can be tricky, however they [the care workers] are very professional and work closely with ourselves to ensure the support is focussed on [the child who receives support]."
- The local authority monitoring report from August 2020 stated, "[The service] has always had a good relationship with Bracknell Forest Council, but this has strengthened."